Only

# STATEMENT OF

PAGE 1 / 183 =

FEC FORM 1		OF	RGANI	ZATIO	ON						Office	e Use (	Only			
1. NAME OF COMMITTEE (ir	n full)		neck if name changed)		mple:If ty		pe	12	FE4	м5						
NRCC										1 1						
		220 FIRST	STREET SE													
ADDRESS (number a	nd street)	320 FIR31	JIREET SE													
		WASHING						DO	C TE A		20003		  ZIP C	CODE A	<u> </u>	
COMMITTEE'S E-MA	AIL ADDRE	SS														
(Check if a is changed		kdavis@	hdafec.com	<b>)</b> 												
		Optional Se kwilliam	econd E-Mail s@nrcc.or	Address <b>g</b>												
COMMITTEE'S WEB  (Check if a is changed	address	DRESS (URL	•													
2. DATE 0	M / D 17		022													
3. FEC IDENTIFIC	CATION N	JMBER ▶	C	C0007582	0											
4. IS THIS STATEN	MENT	NEW (N	N) OR	×	AMI	ENDED	(A)									
I certify that I have e	examined th	nis Statement	and to the b	est of my	knowledge	e and b	elief it	is true	e, cor	rect a	and c	omple	te.			
Type or Print Name	of Treasure	r Davis, Keit	h A., , ,													
Signature of Treasure	er <i>Davis</i>	, Keith A., , ,			[Electron	ically File	ed]	Date		м = м 05	′ [	17	] ′ [		)22	Y
NOTE: Submission of	false, erron		nplete informat E IN INFORM								the pe	nalties	of 2	U.S.C	. §43	7g.
Office Use					For further Federal E	lection Co	ommissio					<b>EC</b> (Revise		<b>RM</b> 1/2012)	1	_

Toll Free 800-424-9530

Local 202-694-1100

FEC F	orm 1 (Revised 02/2009)	Page <b>2</b>
	COMMITTEE e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		(Domogratio
(d) <b>x</b>		(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

FFO F4 - 1 (Day)	22/2000)	Dom: 2
FEC Form 1 (Revised C		Page <b>3</b>
NRCC		
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
COLE COMBINED CO	DMMITTEE	
Mailing Address	12176 CHANCERY STATION CIRCLE	
	RESTON VA 2019	)   –
	CITY STATE	ZIP CODE
_		
Relationship: Connected	I Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and position of the person in	possession of committee
Davis, Keit	th A., , ,	
Full Name	,320 First Street SE	
Mailing Address		
	Washington DC 2000	3
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 202 –	429 - 7000
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Davis, Keit	h A., , ,	1
of Treasurer	1999 First Over 4 95	
Mailing Address	320 First Street SE	
	Washington   DC   2000	3
	CITY STATE	ZIP CODE
Title or Position Treasurer		429 - 7000

Full Name of Designated Agent	Williams, Katy, , ,	
Mailing Address	320 First Street SE	
	Washington DC 20003  CITY STATE Z	IP CODE
Title or Position Assistant Treasure		29 - 7000
sarety deposit boxe	es or maintains funds.	
Name of Bank, Dep		
Name of Bank, Dep	pository, etc.	
Name of Bank, Dep	pository, etc.  Wells Fargo	
Name of Bank, Dep	pository, etc.  Wells Fargo	
Name of Bank, Dep	Wells Fargo  1753 Pinnacle Drive  McLean  VA  22102	ZIP CODE
Name of Bank, Dep	Wells Fargo  1753 Pinnacle Drive  McLean  CITY  STATE  Z	ZIP CODE
Name of Bank, Dep	Wells Fargo  1753 Pinnacle Drive  McLean  CITY  STATE  Z	ZIP CODE
Name of Bank, Dep	Wells Fargo  1753 Pinnacle Drive  McLean  CITY  STATE  Zerository, etc.	ZIP CODE
Name of Bank, Dep	pository, etc.  Wells Fargo  1753 Pinnacle Drive  McLean  VA 22102  TOTY  STATE  Z  Pository, etc.  Country Club Bank  P.O. Box 410889	ZIP CODE
Name of Bank, Dep	Wells Fargo  1753 Pinnacle Drive  McLean  VA 22102  CITY STATE Z  pository, etc.  Country Club Bank	ZIP CODE

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	l Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
WITTMAN VICTO	ORY COMMITTEE		
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA VA	22313
Dalatianahin	OITV	STATE ▲	ZIP CODE ▲
Relationship:	CITY A  ed Organization  Affiliated Committee	Fundraising Representa	ative Leadership PAC S
Connecte			Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee		Leadership PAC S
Connecte	ed Organization Affiliated Committee		Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee		Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identi	Affiliated Committee  Joint  J	Fundraising Representa	
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee    Joint  Ty by name, address (phone number – optional)  CITY	Fundraising Representa	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Bank	Affiliated Committee  y Joint  fy by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which is	Fundraising Representation	ZIP CODE A
Esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Bank	Affiliated Committee  y Joint  fy by name, address (phone number – optional)  CITY   CITY   Te  pories: List all banks or other depositories in which the position of the posi	Fundraising Representation	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Type by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which is paintains funds.  Of Tampa	Fundraising Representation	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Type by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which is paintains funds.  Of Tampa	Fundraising Representation	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
		•	
<u>-</u>	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponse
BUCSHON VICT	ORY COMMITTEE		
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, VA	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Designated Agent: Ident	Affiliated Committee	oint Fundraising Represent	Leaueisiiip FAC SpC
Designated Agent: Ident			Leaueisiiip FAC SpC
Designated Agent: Ident			ative Leadership PAC Spo
Designated Agent: Ident			Leaueisiip FAC SpC
Designated Agent: Ident  Full Name    Mailing Address	fy by name, address (phone number – optional)		
Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)		ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) oı	r(h). <b>Joint Fundraisi</b> r	ng Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	BALDERSON VIC	CTORY COMMITTEE		
		P.O. BOX 26141		
	Mailing Address	F.O. BOX 20141		
		ALEXANDRIA	VA VA	22313
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
-				
B. I	Designated Agent: Identif	y by name, address (phone number - optional)		
8.	Designated Agent: Identif	y by name, address (phone number – optional)	1 1 1 1 1 1 1	
8.		y by name, address (phone number – optional)		
8.	Full Name	y by name, address (phone number – optional)		
8.	Full Name			
3.	Full Name	CITY A	STATE A	ZIP CODE A
B.	Full Name	CITY A	STATE A	
- 9. :	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or main	CITY   CITY   Tel  ries: List all banks or other depositories in which taintains funds.  Of Nevada  8505 Centennial Parkway	ephone Number	ZIP CODE   S funds, holds accounts, rents
- ).	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Tel  wries: List all banks or other depositories in which taintains funds.  of Nevada	ephone Number	ZIP CODE 🛦

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraising</b>	ı Participant:		
1.	, . <del></del>	FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
•	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115 ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Spons
Designated Agent: Identify	by name, address (phone number - optional)		
Full Name			
Mailing Address			
	CITY A	STATE A	ZIP CODE ▲
TITLE OR POSITION	, GITT	SIAIL	ZIF GODL A
	Tele	ephone Number	
safety deposit boxes or mai	ies: List all banks or other depositories in which the ntains funds.  arris Bank NA  1 West Main Street	ne committee deposit	s funds, holds accounts
maining / ladiooo			
	1		
	Madison	Wi	

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisir</b>		FFC ID	С
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
GREG PENCE V	ICTORY		
Mailing Address	P.O. BOX 275		
	TAYLORSVILLE	IN	47280
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
Connecte		Fundraising Representa	Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identif  Full Name  Mailing Address	d Organization Affiliated Committee	Fundraising Representation	Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material and the property of the position of Bank, epository, etc.	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY  CITY  Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited afety deposit boxes or mail	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Telepries: List all banks or other depositories in which aintains funds.  Jational Bank	STATE A	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material and the property of the position of Bank, epository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Telepries: List all banks or other depositories in which aintains funds.  Jational Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM CURTIS J	OINT FUNDRAISING COMMITTEE		
	370 EAST SOUTH TEMPLE		
Mailing Address			
	SUITE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi	ed Organization Affiliated Committee Joint  fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Prosp	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which naintains funds.  Derity Bank	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Prosp	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which paintains funds.	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which naintains funds.  Derity Bank	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which naintains funds.  Derity Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
KIM VICTORY FU	Organization, Affiliated Committee, Joint Fur	ndraising Hepresentativ	e, or Leadersnip PAC Spons
Mailing Address	9460 TEGNER ROAD		
Mailing / Idai occ			
	HILMAR	CA	95324
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Spo
	d Organization Affiliated Committee Jack Jone of Jack Jack Jone of Jac	-	ative Leadership PAC Spo
esignated Agent: Identif		-	Leadership PAC Spo
Pesignated Agent: Identif		-	Leadership PAC Spo
esignated Agent: Identif	y by name, address (phone number – optional)		
Pesignated Agent: Identif	y by name, address (phone number – optional)	-	
Pesignated Agent: Identife Full Name Mailing Address	y by name, address (phone number – optional)		
Full Name  Mailing Address  TITLE OR POSITION  Line Line Line  Banks or Other Deposite afety deposit boxes or me	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Canks or Other Deposite afety deposit boxes or make the property of the proposition of Bank, or Other Deposition, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in white aintains funds.  unties Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	1	FEC ID number	С
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
WALBERG WINN	IING UNDER THE OAKS		
Mailing Address	2870 DOBIE ROAD		
	1		
	MASON	MI	48854
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mailing the second secon	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, Bryan	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, Bryan	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisir</b>	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
STAUBER VICTO	ORY FUND		
	200 W 1 FF THOUWAY		
Mailing Address	332 W. LEE HIGHWAY		
	#303		
	WARRENTON	, ,   VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mailing and the position of Bank, Frankl	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mail ame of Bank, epository, etc. Frankless	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.  in Synergy Bank	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor defety deposit boxes or mail ame of Bank, epository, etc. Frankles	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.  in Synergy Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Mailing Address  TITLE OR POSITION  anks or Other Depositor Deposi	ries: List all banks or other depo	Tele	STATE ▲	ZIP CODE   ZIP CODE   s funds, holds accounts, rent
	CITY A		STATE ▲	
	CITY A			
Mailing Address				
Mailing Address				
Mailing Address				
	1			
Full Name				
	d Organization Affiliated Communication Affiliated Communication		Fundraising Represent	ative Leadership PAC Sp
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Deletions	ALEXANDRIA		VA VA	22314
	SUITE 115			00044
Mailing Address	228 S. WASHINGTON STREET			
<u> </u>				
lame of Any Connected	Organization, Affiliated Commit Y FUND	tee, Joint Fundra	ising Representative	e, or Leadership PAC Spons
4.			FEC ID number	C
3.			FEC ID number	C
			FEC ID number	C
2.			FEC ID number	C

FEC Form 1S (Revised 02/2017)

1		g Participant:						
2					FEC ID	number	С	
					FEC ID	number	С	
3.	1 1 1 1				FEC ID	number	С	
4.					FEC ID	number	С	
Name of An	y Connected C	Organization,	Affiliated Committe	ee, Joint Fundr	aising Rep	esentativ	e, or Lead	lership PAC Spons
WATKII	NS VICTOR	RY COMM	IITTEE					
Mailing	g Address	PO BOX 30	844					
		BETHESDA	<b>\</b>		1	MD	2082	24
Relatio	onship:		CITY A			STATE A		ZIP CODE ▲
	Connected	Organization	Affiliated Comm	ittee 🗶 Joint	Fundraising	Represent	ative	Leadership PAC Sp
Full Nam		1						
	OR POSITION	▼	CITY A					71D 00DE 4
TITLE C						TATE A		ZIP CODE ▲

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	1	FEC ID number	
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
	W VICTORY COMMITTEE		
l			
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	Affiliated Committee X Joint y by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC S
		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
esignated Agent: Identii  Full Name    Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name   _   _    Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, First F	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, First F	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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(h). <b>Joint Fundraisi</b>	ig i ai iioipaiiti		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
DUNN VICTORY	FUND		
Mailing Address	12176 CHANCERY STATION CIR		
	RESTON	VA	20190
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
resignated Agent: Identing Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
Full Name Mailing Address	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make of Bank, repository, etc	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.	<u> </u>	FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint F	undraising Representati	ve, or Leadership PAC Spor
GUEST MAJORIT	「Y FUND 		
Mailing Address	120 N CONGRES ST STE 300		
	JACKSON	MS	39201
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Joint Fundraising Represer	ntative Leadership PAC S
Full Name	y by name, address (phone number – optiona	,	
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address  TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	CITY A		
TITLE OR POSITION	▼ CITY ▲  ries: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION  anks or Other Depositor of the deposite boxes or material bank, Flagsta	CITY ▲  ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
TITLE OR POSITION  anks or Other Depositor of the deposite boxes or material boxes or material boxes. Flagsta	CITY ▲  ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
anks or Other Depositor detay deposit boxes or material boxes are of Bank, epository, etc.	CITY A  ries: List all banks or other depositories in waintains funds.  ar	STATE A Telephone Number	ZIP CODE A
anks or Other Depositor defety deposit boxes or material deposit boxes or material depository, etc.	CITY A  ries: List all banks or other depositories in waintains funds.  ar	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spons
Mailing Address	499 SOUTH CAPITOL STREET SW		
	#407		
	WASHINGTON	DC DC	20003
Dolotionohina	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
Connecte  Designated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee	t Fundraising Representation	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee  Affiliated Committee  Y Joint  To be a committee of the committee of	t Fundraising Representation	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)  CITY		
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposites safety deposit boxes or make the connected agents.	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected  Designated Agent: Identia  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	Affiliated Committee  Y Joint  To the pries: List all banks or other depositories in which anintains funds.  Affiliated Committee  Y Joint  Affiliated Committee  Y Joint  To the pries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

	ng Participant:				
1			FEC	D number	С
2.			FEC	D number	С
3.			FEC	D number	С
4.			FEC	D number	C
Name of Any Connected LATTA VICTORY	_	Affiliated Committee, Joint F	undraising Re	epresentativ	e, or Leadership PAC Spons
LATTA VICTORT					
Mailing Address	9856 ARCH	ER LANE			
					10017
	DUBLIN			OH	43017
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
Connecte	ed Organization	Affiliated Committee	Joint Fundraisi	ng Represent	ative Leadership PAC Sp
Designated Agent: Identif	y by name, add	dress (phone number – optiona	ı <b>l)</b>		
Mailing Address					
				1 1 1 1	
TITLE OR POSITION		CITY A		STATE A	ZIP CODE ▲
TITLE OR POSITION		CITY A	Telephone	STATE A	ZIP CODE A
Banks or Other Depositorsafety deposit boxes or ma	ories: List all ba	anks or other depositories in w	•	STATE A	
Banks or Other Deposite safety deposit boxes or management of Bank, First N	ories: List all ba		•	STATE A	
Banks or Other Deposito safety deposit boxes or ma	ories: List all ba	anks or other depositories in w	•	STATE A	
Banks or Other Depositors of Bank, Depository, etc.	ories: List all ba aintains funds.	anks or other depositories in w	•	STATE A	
Banks or Other Depositors of Bank, Depository, etc.	ories: List all ba aintains funds.	anks or other depositories in w	•	STATE A	

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Page 21 of 183

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
GONZALEZ VICT	FORY FUND		
1			
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposited deposit boxes or mail	CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  Gulf Bank  900 Town & Country Lane	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes or material deposit boxes are depository, etc.	CITY   CITY   Telegries: List all banks or other depositories in which aintains funds.  Gulf Bank  900 Town & Country Lane  Suite 100	the committee deposit	ZIP CODE   S funds, holds accounts, rent
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes or material deposit boxes are depository, etc.	CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  Gulf Bank  900 Town & Country Lane	elephone Number	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisir</b>	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
BUCKEYE VICTO	DRY FUND		
Mailing Address	499 SOUTH CAPITOL STREET SW		
	407		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Su
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the same of Bank, First E	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes or material deposit boxes are as a material deposit boxes.	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions.  Amendment of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

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5(g) or (h). <b>Joint Fundraisi</b>	ng Participant	
1.		FEC ID number
2.		FEC ID number
3.		FEC ID number
4.		FEC ID number
	l Organization, Affiliated Committee, Joint Fundrai	ising Representative, or Leadership PAC Sponsor
NDSTRONG		
Markey Address	1515 BURNT BOAT DR NUM 112	
Mailing Address		
	DISTURBUTE OF THE PROPERTY OF	ND FORM
	BISMARCK	ND 58503
Relationship:	CITY A	STATE ▲ ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representative Leadership PAC Sponso
B. Designated Agent: Identi	fy by name, address (phone number – optional)	
	1	
Mailing Address		
TITLE OR POSITION	N ▼	STATE ▲ ZIP CODE ▲
	Tele	ephone Number
<ul> <li>Banks or Other Deposite safety deposit boxes or m</li> </ul>	ories: List all banks or other depositories in which the	ne committee deposits funds, holds accounts, rents
Name of Bank, Indepository, etc.	endent Bank	
Mailing Address	4420 Sunrise Road	
Ü	1	
	Dound Dook	TV 70005
	Round Rock	TX     78665

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected JOHN ROSE VIC	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
JOHN ROOL VIC			
Mailing Address	PO BOX 2404		
a g			
	COOKEVILLE		38502
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	y by name, address (phone number – optional)		
esignated Agent: Identif			
esignated Agent: Identif			
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mailing and mailing and mailing and mailing Address	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which aintains funds.  est Bank	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  est Bank  663 W. Nees Avenue	STATE A elephone Number the committee deposit	ZIP CODE   s funds, holds accounts, rents
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which aintains funds.  est Bank	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r	g raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected HRW VICTORY F	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
HRW VICTORY F			
Mailing Address	824 S MILLEDGE AVE STE 101		
Mailing Address			
	ATUENC		20005
	ATHENS	GA GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
Connected		Fundraising Representa	Leadership PAC Sp
Connecter connec		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name		Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mailing and the control of Bank, Cader	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or material deposition and the company of the company o	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which anintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  Ince Bank	STATE A	ZIP CODE A
Esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor affety deposit boxes or material deposition and the compositor of the composit	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  Ince Bank	STATE A	ZIP CODE A

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1.				
			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	C
lame of Any Connected	Organization, Affiliated Commi	ttee. Joint Fundra	sing Representative	e. or Leadership PAC Spon
TEAM TIMMONS				
Mailing Address	228 S. WASHINGTON ST. STE. 115			
			VA I	22314
	ALEXANDRIA			
Relationship:	ALEXANDRIA  CITY   Organization		STATE ▲	ZIP CODE ▲ ative Leadership PAC Sp
Connected esignated Agent: Identify	CITY 4	mittee X Joint F		
Connected esignated Agent: Identify Full Name	CITY A Organization Affiliated Com	mittee X Joint F		
Connected esignated Agent: Identify	CITY A Organization Affiliated Com	mittee X Joint F		
Connected esignated Agent: Identify Full Name	CITY A Organization Affiliated Com	mittee X Joint F		ative Leadership PAC Sp
esignated Agent: Identify  Full Name  Mailing Address	Organization Affiliated Comby name, address (phone number of the control of the c	per – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify  Full Name	Organization Affiliated Comby name, address (phone number of the control of the c	mittee	Fundraising Represent	ative Leadership PAC Sp

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h). <b>Joint Fundraisi</b>	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
WESTERMAN V	ICTORY FUND		
Mailing Address	PO BOX 21097		
	HOT SPRINGS	AR	71903
Deletienskin	CITY ▲	STATE ▲	ZIP CODE ▲
Relationship:			П
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
Connecte			ative Leadership PAC S
Connecte	ed Organization Affiliated Committee		ative Leadership PAC S
Connecte esignated Agent: Identi Full Name	ed Organization Affiliated Committee		Leadership PAC S
Connecte esignated Agent: Identi Full Name	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee    Joint  My by name, address (phone number – optional)	Fundraising Representa	
Connecte esignated Agent: Identi Full Name	Affiliated Committee   Affiliated Committee    Joint  My by name, address (phone number – optional)  CITY	Fundraising Representation	
Connecte  esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank, Ameri	Affiliated Committee  Affiliated Committee  Ty Joint  Affiliated Committee  Ty Joint  CITY  CITY  Te	Fundraising Representation	ZIP CODE A
Connected sesignated Agent: Identification of Bank, American Agent: Identification of Connected Sesignated Se	Affiliated Committee  Affiliated Committee  Figure 1. Joint  Affiliated Committee  Figure 2. Joint  Affiliated Committee  Figure 3. Joint  CITY   CITY   Telepries: List all banks or other depositories in which saintains funds.	Fundraising Representation	ZIP CODE A
connected esignated Agent: Identification of the position of t	Affiliated Committee  Affiliated Committee  Figure 1	Fundraising Representation	ZIP CODE A
connected esignated Agent: Identification of the position of t	Affiliated Committee  Affiliated Committee  Figure 1	Fundraising Representation	ZIP CODE A

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				_
5(g)	or(h). <b>Joint Fundraising</b>	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative,	or Leadership PAC Sponsor
	TEAM HUDSON			I
	Mailing Address	824 S MILLEDGE AVE, STE 101		
		1		
		ATHENS	ı GA ı	30605
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		5111 2		
	П.			
	Connected	Organization Affiliated Committee X Joint	Fundraising Representat	ive Leadership PAC Sponsor
8.		Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representat	ive Leadership PAC Sponsor
8.			Fundraising Representat	ive Leadership PAC Sponsor
8.	Designated Agent: Identify		Fundraising Representat	ive Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name		Fundraising Representat	Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name		Fundraising Representat	Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY	STATE A	
8.	Designated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)  CITY		
	Designated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   Teleses: List all banks or other depositories in which to	STATE A	ZIP CODE A
8. 9.	Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	by name, address (phone number – optional)  CITY   CITY   Tel  ies: List all banks or other depositories in which to ntains funds.	STATE A	ZIP CODE A
	Pull Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, PNC B Depository, etc.	by name, address (phone number – optional)  CITY   CITY   Tel  ies: List all banks or other depositories in which to ntains funds.	STATE A	ZIP CODE A
	Pull Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank, PNC B	by name, address (phone number – optional)  CITY   CITY   Teleses: List all banks or other depositories in which to ntains funds.	STATE A	ZIP CODE A
	Pull Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, PNC B Depository, etc.	by name, address (phone number – optional)  CITY   CITY   Tel  ies: List all banks or other depositories in which to ntains funds.  2 North 2nd Street	STATE A  lephone Number  the committee deposits	ZIP CODE   Tunds, holds accounts, rents
	Pull Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, PNC B Depository, etc.	by name, address (phone number – optional)  CITY   CITY   Teleses: List all banks or other depositories in which to ntains funds.	STATE A	ZIP CODE A

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1.				
2. 🔟			FEC ID number	С
			FEC ID number	C
3.			FEC ID number	С
4.			FEC ID number	C
	Any Connected O	rganization, Affiliated Committee, Joint Fun Y FUND	draising Representati	ve, or Leadership PAC Sponsor
Mail	ing Address	499 SOUTH CAPITOL STREET SW #405		
		WASHINGTON	DC	20003
Rela	tionship:	CITY ▲	STATE 4	ZIP CODE ▲
		Organization Affiliated Committee X Joint	int Fundraising Represer	
<b>Designate</b> Full Na		by name, address (phone number – optional)		
Full N				
Full N	ame			
Full N	ame	by name, address (phone number – optional)		
Full Nailing	ame	oy name, address (phone number – optional)		

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r(h). <b>Joint Fundraisi</b> r	ng Participant:			
1		FEC ID	number	C
2		FEC ID	number	C
3.		FEC ID	number	C
4.		FEC ID	number	C
=	Organization, Affiliated Committee, Join	nt Fundraising Rep	resentative	e, or Leadership PAC Sponso
VAN TAYLOR VI	STORY FUND			
Mailing Address	1900 PRESTON ROAD	1 1 1 1 1 1		
	#267 - PMB 229	<u> </u>		
	PLANO		TX	75093
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	X Joint Fundraising	Representa	tive Leadership PAC Spo
Full Name	<u> </u>			
	I	1		
	CITY A		TATE A	7IR CODE A
TITLE OR POSITION	▼ CITY ▲	\$	STATE A	ZIP CODE A
TITLE OR POSITION	▼ CITY ▲	Telephone Nu	STATE A	ZIP CODE A
Banks or Other Depositorsafety deposit boxes or management	pries: List all banks or other depositories in	Telephone Nu	STATE ▲ umber	
Banks or Other Depositor safety deposit boxes or management of Bank, Johns	pries: List all banks or other depositories in aintains funds.	Telephone Nu	STATE ▲ umber	
Banks or Other Depositors safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in aintains funds.  on Bank	Telephone Nu	STATE ▲ umber	
Banks or Other Depositors safety deposit boxes or management of Bank, Depository, etc.	ories: List all banks or other depositories in aintains funds.  on Bank	Telephone Nu	STATE ▲ umber	

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h). <b>Joint Fundraisi</b>	3		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
DAN BISHOP VI	CTORY COMMITTEE		
I			
Mailing Address	10809 GRASSY CREEK PL		
	RALEIGH	, , , NC ,	27614
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which paintains funds.	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and pank, Plains	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and pank, Plains	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which paintains funds.	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which naintains funds.  Capital Bank	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which naintains funds.  Capital Bank  201 W. 5th Street	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) o	r(h). <b>Joint Fundraisin</b> g	յ Participant:			
	1.		FEC II	0 number	C
	2.		FEC II	0 number	C
	3.		FEC II	O number	C
	4.		FEC II	0 number	C
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint Fund	draising Re	oresentativ	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2485			
		SPRINGFIELD	1	VA	22152
	Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joi	nt Fundraisin	g Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)			
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
		1	Telephone N	umber	
:	Banks or Other Depositor safety deposit boxes or mai Name of Bank, , TD Bar		n the commi	ttee deposit	s funds, holds accounts, rents
	Depository, etc.				
	Mailing Address	1398 Highway 9			
		Old Bridge		NJ	08857
ı		CITY ▲		STATE A	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Page  $\underline{^{33}}$  of  $\underline{^{183}}$ 

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
TEAM GT			
Mailing Address	PO BOX 30844		
	1		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee January Joi	nt Fundraising Representa	ative Leadership PAC Sp
	y by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or me	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, repository, etc.	y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.  Rim Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) or (h).	Joint Fundraising	Participant:		
1	1		FEC ID number	C
2	2.		FEC ID number	C
9	3.		FEC ID number	C
	4.		FEC ID number	C
6. Nam	ne of Any Connected (	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
C	CAWTHORN TRIL	JMPH COMMITTEE		
		. 2102 IIII IAN CI EN CID		
	Mailing Address	3103 JULIAN GLEN CIR		
		WAXHAW	NC NC	28173
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	- - - - - - - - - - - - - - - - - - -	ative Leadership PAC Sponsor
8. <b>Desi</b>	ignated Agent: Identify	by name, address (phone number - optional)		
ı	Full Name	by name, address (phone number – optional)		
ı		by name, address (phone number – optional)		
ı	Full Name	by name, address (phone number – optional)		
ı	Full Name		STATE A	ZIP CODE A
ı	Full Name	CITY A	STATE A	ZIP CODE A
ı	Full Name	CITY A	STATE A	
9. <b>Ban</b> l safet	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositor ty deposit boxes or mai	CITY   CITY   Tele  ies: List all banks or other depositories in which the	ephone Number	ZIP CODE A
9. <b>Ban</b> l safet	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositor ty deposit boxes or maine of Bank, ository, etc.	CITY   CITY   Tele  ies: List all banks or other depositories in which the nations funds.  S United Bank  14 S. Moger Avenue	ephone Number	ZIP CODE   S funds, holds accounts, rents
9. <b>Ban</b> l safet	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositor ty deposit boxes or maine of Bank, ository, etc.	CITY   CITY   Tele  ies: List all banks or other depositories in which the ntains funds.  S United Bank	ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1					
1			FEC ID	number	C
2			FEC ID	number	С
3.			FEC ID	number	С
4.			FEC ID	number	С
lame of Any Connected	Organization, Af	filiated Committee, Joint F	undraising Repr	esentativ	e, or Leadership PAC Spon
MILLER-MEEKS	VICTORY FU	JND	1 1 1 1 1 1	1 1 1	
Mailing Address	PO BOX 183				
			1	WI	54016
	HUDSON				
Relationship:		CITY ▲  Affiliated Committee		STATE A	ZIP CODE ▲  Leadership PAC Sr
Connecte	d Organization		Joint Fundraising		
Connecte	d Organization	Affiliated Committee	Joint Fundraising		
Connecte  esignated Agent: Identif	d Organization	Affiliated Committee	Joint Fundraising		
Connecte  resignated Agent: Identif	d Organization	Affiliated Committee	Joint Fundraising		
Connecte  resignated Agent: Identif	d Organization  y by name, addres	Affiliated Committee  ss (phone number – optional	Joint Fundraising		Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	d Organization  y by name, addre	Affiliated Committee x	Joint Fundraising	Representa	ative Leadership PAC Sp
Connecte  Pesignated Agent: Identif	d Organization  y by name, addre	Affiliated Committee  ss (phone number – optional	Joint Fundraising	Representa	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	AMERICAN DREA	AM VICTORY FUND		1
	Mailing Address	9070 IRVINE CENTER DRIVE		
		SUITE 150		
		IRVINE	CA	92618
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Full Name	1		
	Mailing Address	CITY ▲	STATE A	ZIP CODE A
		•	STATE A	
	Mailing Address	•		
).	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main	Tele  ies: List all banks or other depositories in which the intains funds.	STATE A	ZIP CODE A
).	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main	Tele  ies: List all banks or other depositories in which the	STATE A	ZIP CODE A
).	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Tri Cou	Tele  ies: List all banks or other depositories in which the intains funds.	STATE A	ZIP CODE A
).	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	Telesies: List all banks or other depositories in which thintains funds.	STATE A	ZIP CODE A
).	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	Telesies: List all banks or other depositories in which thintains funds.	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:			
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	C
4.			FEC ID number	C
ame of Any Connected	Organization, Affilia	ated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
GIMENEZ VICTO	PRY COMMITTI	EE		
1				
Mailing Address	824 S MILLEDGE	AVE STE 101		
	1			
	ATHENS		GA	30605
Relationship:		CITY A	STATE A	ZIP CODE A
	d Organization		nt Fundraising Representa	
esignated Agent: Identif	y by name, address	(phone number - optional)		
Full Name	y by name, address	(phone number – optional)		
	y by name, address	(phone number – optional)		
Full Name	y by name, address	(phone number – optional)		
Full Name	y by name, address			
Full Name			STATE A	ZIP CODE A
Full Name		CITY A	STATE A	
Full Name		CITY A	1	
Full Name Mailing Address  TITLE OR POSITION	l ▼	CITY A	Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	l ▼	CITY A	Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, Huntin	l ▼	CITY A	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ories: List all banks of aintains funds.	CITY A	Telephone Number	
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, Huntin	ories: List all banks of aintains funds.  ngton National E	CITY A	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ories: List all banks of aintains funds.  A1 S. High Street	CITY A	Telephone Number	zip code 🛦
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ories: List all banks of aintains funds.  ngton National E	CITY A	Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Sponso
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identif	Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)		
Connecte  Designated Agent: Identif	Affiliated Committee    y Joint  y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spo
Connected  Designated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  y by name, address (phone number – optional)  CITY		
Connected  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Connected  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposites afety deposit boxes or make the safety deposit b	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
RESCHENTHAL	ER VICTORY FUND		
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identii	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Amari	CITY A  Topories: List all banks or other depositories in which	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY ▲  CITY ▲  Dries: List all banks or other depositories in which aintains funds.  Illo National Bank	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  Dries: List all banks or other depositories in which aintains funds.  Illo National Bank	elephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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h). <b>Joint Fundraisi</b> r	.g . a. a		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
BYRON DONALE	OS VICTORY FUND		
Mailing Address	2430 VANDERBILT BEACH ROAD		
Mailing Address	STE 108 PMB 260		
	NAPLES		34108
		FL	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint	Fundraising Represent	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or marks	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or marks	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes or material deposit boxes are affected and and a property deposit boxes or material deposit between deposit boxes or material depo	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  way Bank	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, etc.	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  way Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

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h). <b>Joint Fundraisi</b> n			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
GREEN VICTOR	Y FUND		
Mailing Address	PO BOX 2706		
	BRENTWOOD		37024
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	d Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify	y by name, address (phone number – optional)  CITY		
Full Name	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.  Bridge Bank	STATE A	ZIP CODE A
Full NameMailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.  Bridge Bank	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). <b>Joint Fundraisi</b> r	g Participant:		
1		FEC ID number	er C
2.		FEC ID number	er C
3.		FEC ID number	er C
4.		FEC ID number	er C
ame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representa	ative, or Leadership PAC Spor
LESKO VICTORY	COMMITTEE		
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE	ZIP CODE ▲
Connecte	d Organization Affiliated Committee  y by name, address (phone number – optio	Joint Fundraising Repres	entative Leadership PAC S
Connecte esignated Agent: Identif		Joint Fundraising Repres	Leadership PAC S
Connecte esignated Agent: Identif		Joint Fundraising Repres	Leadership PAC S
Connecte esignated Agent: Identif		Joint Fundraising Repres	
Connecte esignated Agent: Identif	y by name, address (phone number – optio	Joint Fundraising Representation	
Connecte esignated Agent: Identif	y by name, address (phone number – optio	Joint Fundraising Repres	
Connecte  esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optio	Joint Fundraising Representation	
Connecte esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optio	Joint Fundraising Representation	
Esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	y by name, address (phone number – optio	Joint Fundraising Representation (Page 1997)  STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor  affety deposit boxes or mail	y by name, address (phone number – optio	Joint Fundraising Representation (Page 1997)  STATE A  Telephone Number	ZIP CODE A
Esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited aftery deposit boxes or mailing and the position of Bank, Fifth T	y by name, address (phone number – optio	Joint Fundraising Representation (Page 1997)  STATE A  Telephone Number	ZIP CODE A
connecte  esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or material depositions are of Bank, epository, etc.	y by name, address (phone number – optio	Joint Fundraising Representation (Page 1997)  STATE A  Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor  affety deposit boxes or mail	v by name, address (phone number – option of the control of the co	Joint Fundraising Representation (Page 1997)  STATE A  Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite  affety deposit boxes or material depositions are propository, etc.	v by name, address (phone number – option of the control of the co	Joint Fundraising Representation (Page 1997)  STATE A  Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page  $\underline{^{43}}$  of  $\underline{^{183}}$ 

(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Representativ	re, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected		int Fundraising Represent	tative Leadership PAC Spo
Connected	d Organization Affiliated Committee	int Fundraising Represent	tative Leadership PAC Spo
Connected  Connected  Connected  Connected  Connected	d Organization Affiliated Committee	int Fundraising Represent	tative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	Affiliated Committee   Joint Display by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name  Mailing Address	Affiliated Committee  y by name, address (phone number – optional)  CITY		
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositors afety deposit boxes or mailing and mai	Affiliated Committee  y Joint of Drame, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE   Telephone Number	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mailing agents agents agents agents agents agents.  Depository, etc.	Affiliated Committee  y Joint of Santa Clarita	STATE   Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) or (	(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4.		FEC ID number	С
5. N		Organization, Affiliated Committee, Joint Fundra	nising Representativ	e, or Leadership PAC Sponsor
	HERN VICTORY	FUND 		
	Mailing Address	8630 S PEORIA AVE		
		TULSA	OK	74132
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponsor
3. D	Pesignated Agent: Identify	by name, address (phone number – optional)		
3. <b>D</b>		by name, address (phone number – optional)		
3. D	Full Name	by name, address (phone number – optional)		
3. D	Full Name	by name, address (phone number – optional)		
3. <b>D</b>	Full Name	CITY	STATE A	ZIP CODE A
3. <b>D</b>	Full Name	CITY A		
 . <b>B</b> sa N	Full Name  Mailing Address  TITLE OR POSITION  Canks or Other Depositor afety deposit boxes or mail	CITY   CITY   Tel  ries: List all banks or other depositories in which taintains funds.  of North Georgia	STATE A	ZIP CODE A
 . <b>B</b> sa N	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor defety deposit boxes or mails and the control of Bank, Bank of Bank, Bank, Bank of Bank, Bank, Bank, Bank, Bank, Bank, Bank, B	CITY   CITY   Tel  ries: List all banks or other depositories in which taintains funds.	STATE A	ZIP CODE A
 . <b>B</b> sa N	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor  afety deposit boxes or mail  Jame of Bank, Depository, etc.	CITY   CITY   Tel  ries: List all banks or other depositories in which taintains funds.  of North Georgia	STATE A	ZIP CODE A
 . <b>B</b> sa N	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor  afety deposit boxes or mail  Jame of Bank, Depository, etc.	CITY   CITY   Tel  ries: List all banks or other depositories in which taintains funds.  of North Georgia	STATE A	ZIP CODE A

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afety deposit boxes or ma	Te ries: List all banks or other depositories in which	the committee deposit	s funds, holds accounts, rent
anks or Other Depositoratety deposit boxes or material boxes are material boxes.	ries: List all banks or other depositories in which aintains funds.  of America		s funds, holds accounts, rent
anks or Other Deposito afety deposit boxes or ma	Te vries: List all banks or other depositories in which aintains funds.		s funds, holds accounts, rent
anks or Other Deposito	Te ries: List all banks or other depositories in which		s funds, holds accounts, rent
TITLE OR POSITION	•	lephone Number	
TITLE OR POSITION	•	Jankana Nicotes I	[_] [_]
		J	=::
	CITY <b>_</b>	STATE ▲	ZIP CODE ▲
			1 1
Mailing Address			
Mailing Address			
esignated Agent: Identify	y by name, address (phone number – optional)		
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	SPRINGFIELD	VA VA	22152
Mailing Address	PO BOX 2485		
. INICIVIONING ROL	JGERS WIN THE FUTURE FUND		
•	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
4.			
		FEC ID number	С
J. 1		FEC ID number	C
3.		FEC ID number	С
2		FEC ID number	C

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page <u>46</u> **of** <u>183</u>

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID numb	er C
2.		FEC ID numb	er C
3.		FEC ID numb	er C
4.		FEC ID numb	er C
ame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representa	ative, or Leadership PAC Spon
JEANNE VICTOR	RY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising Repres	sentative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee  y by name, address (phone number – option		sentative Leadership PAC S
			Sentative Leadership PAC S
esignated Agent: Identif			Sentative Leadership PAC S
esignated Agent: Identif			Sentative Leadership PAC S
esignated Agent: Identif			Sentative Leadership PAC S
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – option		
esignated Agent: Identif	y by name, address (phone number – option	nal)	
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – option  CITY   CITY   Ories: List all banks or other depositories in aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION Mailing Address  anks or Other Deposited afety deposit boxes or mailing and mailing and mailing Address	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in aintains funds.	STATE A	ZIP CODE   ZIP CODE   Dosits funds, holds accounts, ren

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n). <b>Joint Fundraising</b>	Participant:			
1.		FEC	ID number	C
2.		FEC	ID number	С
3.		FEC	ID number	C
4.		FEC	ID number	C
ame of Any Connected (	Organization, Affiliated Committee, Joi	nt Fundraising I	Representative	e, or Leadership PAC Spor
OBERWEIS VICTO	DRY COMMITTEE			
Mailing Address	PO BOX 30844			
	BETHESDA		MD	20824
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee	<b>✗</b> Joint Fundrais	sing Representa	ative Leadership PAC S
	Organization Affiliated Committee  by name, address (phone number – op		sing Represent	ative Leadership PAC S
esignated Agent: Identify			sing Representa	Leadership PAC S
esignated Agent: Identify  Full Name			sing Representa	Leadership PAC S
esignated Agent: Identify  Full Name		tional)	sing Representa	Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – op	tional)	STATE A	
esignated Agent: Identify  Full Name	by name, address (phone number – op	tional)	STATE A	
Full Name  Mailing Address  TITLE OR POSITION  Title Or Depositoring the properties of Bank, National	by name, address (phone number – op	tional)  Telephone	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoring the deposition boxes or main arms of Bank, Pational appository, etc.	by name, address (phone number – op	tional)  Telephone	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Title Or Depositoring the properties of Bank, National	by name, address (phone number – op	tional)  Telephone	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoring the deposition boxes or main arms of Bank, Pational appository, etc.	by name, address (phone number – op	tional)  Telephone	STATE A	ZIP CODE A

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or/h) laint Eundualaia	a Participant:		
or(h). <b>Joint Fundraisin</b>	g r an norpanic.	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundrai	sing Representative	, or Leadership PAC Sponsor
COLLINS FOR TE	EXAS VICTORY FUND		
	PO BOX 30844		
Mailing Address	FO BOX 30044		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	- - - - - - - - - - - - - - - - - - -	tive Leadership PAC Spons
Full Name			
Mailing Address			
Mailing Address	CITY A	STATE A	ZIP CODE A
	•	STATE A	ZIP CODE A
Mailing Address	•		ZIP CODE A
Mailing Address  TITLE OR POSITION	•	STATE ▲	
Mailing Address  TITLE OR POSITION	ries: List all banks or other depositories in which the	STATE ▲	
Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching and the position of Bank, Access	ries: List all banks or other depositories in which the	STATE ▲	
Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which thaintains funds.	STATE ▲	
Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching and the position of Bank, Access	ries: List all banks or other depositories in which that intains funds.  S National Bank  1800 Robert Fulton Drive	STATE ▲	
Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which that intains funds.  S National Bank  1800 Robert Fulton Drive  Suite 310	STATE A ephone Number ne committee deposits	s funds, holds accounts, rents
Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which that intains funds.  S National Bank  1800 Robert Fulton Drive	STATE ▲	

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5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:			
	1.		FEC II	O number	C
	2.		FEC II	O number	C
	3.		FEC II	O number	C
	4.		ر   FEC ال	O number	C
	4.		J		
6.		Organization, Affiliated Committee, Joint Fu	ndraising Re	presentativo	e, or Leadership PAC Sponsor
	TEAM FITZ			1 1 1 1	
	Mailing Address	PO BOX 30844			
		BETHESDA	, , , <b>1</b>	MD	20824
	Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Connected	1 Organization Affiliated Committee	oint Fundraisin	g Representa	ative Leadership PAC Sponsor
8.	Pull Name	by name, address (phone number – optional	)	1 1 1 1	
	Mailing Address				
		1		1 1 1 1	
		CITY ▲		STATE A	ZIP CODE ▲
	TITLE OR POSITION	▼			1 1 1 1
			Telephone N	lumber	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in whintains funds.  of America  31531 Santa Margarita Parkway	ich the commi	ittee deposit	s funds, holds accounts, rents
	Mailing Address	1901 Janua Margania I arkway			
		Rancho Santa Marga		CA	92688
		CITY ▲		STATE A	ZIP CODE ▲

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> n	J		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Ponrocontative	o or Londorphin DAC Spon
STEEL VICTORY	_	aising nepresentative	e, or Leadership FAC Spon
Mailing Address	9070 IRVINE CENTER DRIVE #150		
	IRVINE	CA	92618
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Spanisher
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor  afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which aintains funds.  Sunity Bank of Mississippi	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or material depositions are of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which aintains funds.  Sunity Bank of Mississippi	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	I Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
SMUCKER VICT	ORY COMMITTEE		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee  Joi	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, First (	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, First (	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which paintains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   CITY   Cries: List all banks or other depositories in which paintains funds.  Capital Bank of Texas	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which raintains funds.  Capital Bank of Texas  310 West Wall Street	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

g) or (h). <b>Joint Fundraisi</b> n	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
LAWISOTOLIC			
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
Full Name	by name, address (phone number – optional)	1 1 1 1 1 1 1	
Mailing Address			
TITLE OR POSITION	_ CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSITION		lephone Number	
Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.  Mailing Address		the committee deposit	s funds, holds accounts, rents
	Tulare	CA	93274
	CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

5(g)	or(h). Joint Fundraising	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	BIG DAN RODIME	ER VICTORY COMMITTEE		
	Mailing Address	50 S JONES BLVD STE 201		
		LAS VEGAS	NV	89107
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	- Fundraising Representa	Leadership PAC Sponsor
В.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
		1		
	TITLE OF FOOITION	_ CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	1	ephone Number	-   -
		Tele	epriorie inumber	
9.	Banks or Other Depositor	ies: List all banks or other depositories in which the	ne committee deposit	s funds, holds accounts, rents
	safety deposit boxes or ma			
	Name of Bank, Depository, etc.	Bank		
	Mailing Address	2404 Sir Barton Way		
				<u> </u>
		Lexington	KY	40509
		CITY A	STATE A	ZIP CODE A

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). Joint Fundraisin			
1.		FEC ID number	С
2.		FEC ID number	C
3		FEC ID number	С
4		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
HOUSE VICTOR'	Y FUND		
Mailing Address	2318 CURTIS STREET		
	DENVER	CO	80205
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	
Connected			
Connected Signated Agent: Identify	d Organization Affiliated Committee		
Connected signated Agent: Identify	d Organization Affiliated Committee		
Connected signated Agent: Identify	d Organization Affiliated Committee	t Fundraising Representa	
Connected signated Agent: Identify Full Name Mailing Address	d Organization Affiliated Committee Joint	t Fundraising Representa	Leadership PAC S
Connected signated Agent: Identify	Affiliated Committee  y by name, address (phone number – optional)  CITY	t Fundraising Representa	Leadership PAC S
Connected signated Agent: Identify Full Name Mailing Address  TITLE OR POSITION INC. Inc. or Other Depositor fety deposit boxes or mail	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	t Fundraising Representa	Leadership PAC S
connected signated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Inks or Other Depositor fety deposit boxes or mailing and mailing Address	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Teles: List all banks or other depositories in which aintains funds.	t Fundraising Representa	Leadership PAC S
Connected signated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Inks or Other Depositor fety deposit boxes or mail may be of Bank, pository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  ries: List all banks or other depositories in which aintains funds.  rgan Chase Bank, NA	t Fundraising Representa	Leadership PAC S

FEC Form 1S (Revised 02/2017)

g) or (h).	Joint Fundraising	y Participant:		
1.			FEC ID number	C
2			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	=	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	VOT WINCE VIO			
Ma	ailing Address	228 S. WASHINGTON ST.		
		STE. 115		
		ALEXANDRIA	VA	22314
Re	elationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	undraising Representa	Leadership PAC Sponso
_	Name	by name, address (phone number – optional)		
Maili	ing Address			
<b>T</b> IT	LE OR POSITION	_ CITY ▲	STATE A	ZIP CODE A
1	LE ON POSITION	<b>*</b>		
		1	ohone Number	
	eposit boxes or mai	ies: List all banks or other depositories in which the		s funds, holds accounts, rents
safety de Name of Deposito	eposit boxes or mai	ies: List all banks or other depositories in which the intains funds.		s funds, holds accounts, rents
safety de Name of Deposito	eposit boxes or main f Bank, River Vory, etc.	ies: List all banks or other depositories in which the intains funds.  /alley Bank		s funds, holds accounts, rents
safety de Name of Deposito	eposit boxes or main f Bank, River Vory, etc.	ies: List all banks or other depositories in which the intains funds.  /alley Bank		s funds, holds accounts, rents

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or(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
VICTORIA VICTO	JRY FUND		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Spon
Designated Agent: Identi	fy by name address (phone number – entional)		
Designated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or more safety deposit boxes. Fifth	CITY A  Tel  pries: List all banks or other depositories in which the	STATE ▲ ephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or mainly and the safety deposit boxes or m	CITY   CITY   Tel  pries: List all banks or other depositories in which the aintains funds.  Third Bank	STATE ▲ ephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or more safety deposit boxes. Fifth	CITY   CITY   Tel  Dries: List all banks or other depositories in which the aintains funds.	STATE ▲ ephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the property of the position of the positi	CITY   CITY   Tel  pries: List all banks or other depositories in which the aintains funds.  Third Bank	STATE ▲ ephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the property of the position of the positi	CITY   CITY   Tel  pries: List all banks or other depositories in which the aintains funds.  Third Bank	STATE ▲ ephone Number	

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Participant:			
	FEC	ID number	C
		ID number	C
		ID number	C
	FEC	ID number	C
=	ee, Joint Fundraising	Representative	e, or Leadership PAC Sponsor
P.O. BOX 2811			
LAKELAND		FL	33806
CITY ▲		STATE A	ZIP CODE ▲
Organization Affiliated Comm	nittee <b>X</b> Joint Fundrai	sing Representa	Leadership PAC Spons
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
1			
CITY A		STATE A	ZIP CODE A
CITY A	Telephone	STATE A	ZIP CODE A
es: List all banks or other depositains funds.  One		STATE A	
es: List all banks or other depositains funds.  One		STATE A	
es: List all banks or other depositains funds.  One		STATE A	
(	P.O. BOX 2811  LAKELAND  CITY   Organization  Affiliated Comm	FEC FEC FEC FEC  Prepared and the prepar	P.O. BOX 2811  LAKELAND  CITY  STATE  Organization  Affiliated Committee

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1	1	FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected (	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
UNITED TO WIN			
Mailing Address	PO BOX 9891		
	ARLINGTON	, ,   VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE A
TITLE OR POSITION	•	STATE   STATE   lephone Number	ZIP CODE A
anks or Other Depositor afety deposit boxes or mai	ies: List all banks or other depositories in which that is the standard of the standard funds.	lephone Number	
anks or Other Depositor afety deposit boxes or mai	ies: List all banks or other depositories in which that is the standard of the standard funds.	lephone Number	
anks or Other Depositor afety deposit boxes or main ame of Bank, epository, etc.	ies: List all banks or other depositories in which that is standard.  Bank	lephone Number	

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h). <b>Joint Fundraisin</b>	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM HILL			
Mailing Address	PO BOX 7244		
	LITTLE ROCK	AR	72217
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
	d Organization Affiliated Committee Joint by pame, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify  Full Name	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identify	y by name, address (phone number – optional)  CITY		
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositors, etc First Sepository, etc.	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.  tate Bank	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.  tate Bank	STATE A	ZIP CODE A

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y) or (h). <b>Joint Fundraisin</b>	g Participant:				
			FEC ID nu	umber	
2.			_   FEC ID nu	umber	
3.			_   FEC ID nu	umber	
			_   FEC ID nu	umber	
				_	
Name of Any Connected	Organization, Affili	ated Committee, Joint F	undraising Repres	entative,	or Leadership PAC Sponsor
MANN VICTORY	FUND				
Mailing Address	PO BOX 1084				
	SALINA			KS	67402
Relationship:		CITY A	S	TATE A	ZIP CODE ▲
Connected	Organization	Affiliated Committee	Joint Fundraising Re	epresentati	ve Leadership PAC Sponsor
Full Name					
Mailing Address					
TITLE OR POSITION	_	CITY A	STA	TE 🛦	ZIP CODE ▲
	<u> </u>		Telephone Numb	oer	
Banks or Other Depositor safety deposit boxes or ma		or other depositories in w	hich the committee	deposits	funds, holds accounts, rents
		Part I			
Name of Bank, TLC Concepts Depository, etc.	ommunity Cred	dit Union			
Mailing Address	3030 S. Adrian Hig	hway			
	Adrian			MI	49221
		CITY A	OTA	TE 🛦	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 61 of 183

n). <b>Joint Fundraisin</b> g	Participant:		0
1.		FEC ID numb	
2.		FEC ID numb	er C
3.		FEC ID numb	er C
4.		FEC ID numb	er C
	Organization, Affiliated Committee, Joint Fu	undraising Represent	ative, or Leadership PAC Spo
LATURNER VICTO	ORY FUND		
Mailing Address	PO BOX 67237		
	TOPEKA	KS	66667
Relationship:	CITY 🛦	STATE	ZIP CODE ▲
		Joint Fundraising Repres	sentative Leadership PAC S
	Organization Affiliated Committee		Sentative Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify			Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional		
esignated Agent: Identify	by name, address (phone number – optional		
Full Name  Mailing Address  TITLE OR POSITION  Anks or Other Depositor fety deposit boxes or main arme of Bank, Empire	by name, address (phone number – optional  CITY   CITY   Ces: List all banks or other depositories in wh	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or main arme of Bank, Empire epository, etc.	by name, address (phone number – optional  CITY   CITY   Ges: List all banks or other depositories in white the standard	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Anks or Other Depositor fety deposit boxes or main arme of Bank, Empire	by name, address (phone number – optional  CITY   CITY   Res: List all banks or other depositories in what intains funds.  National Bank	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or main arme of Bank, Empire epository, etc.	by name, address (phone number – optional  CITY   CITY   Res: List all banks or other depositories in what intains funds.  National Bank	STATE A	ZIP CODE A  oosits funds, holds accounts, rel

FEC Form 1S (Revised 02/2017)

1	g Participant:	FFO ID	C
1		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Claudia Tenney to	or Congress Victory Fund		
Mailing Address	PO BOX 244		
	CLINTON	NY NY	13323
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponso
Designated Agent: Identify	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositors afety deposit boxes or mail	CITY   CITY   Tele  ries: List all banks or other depositories in which that the sintains funds.  gton Bank  1901 Breton Road SE	ephone Number	s funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main that the safety deposit boxes or main that the safety depository, etc.	CITY   CITY   Tele  ries: List all banks or other depositories in which the saintains funds.  gton Bank	ephone Number	

FEC Form 1S (Revised 02/2017)

Page <u>63</u> **of** <u>183</u>

(h). Joint Fundraisi			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
7.			
lame of Any Connected	I Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
ADERTIOET WAS			
Mailing Address	831 LINWOOD CT		
	BIRMINGHAM	AL	35222
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
	Affiliated Committee Joint of	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management.	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which raintains funds.  ic Union Bank  1800 Robert Fulton Drive	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1					
			FEC ID nu	ımber C	
2.			FEC ID nu	ımber C	
3.			FEC ID nu	ımber C	
4			FEC ID nu	ımber C	
Name of Any Connected DIANA VICTORY		iliated Committee, Joint Fu	ndraising Repres	entative, or	Leadership PAC Sponsor
	CINE				
Mailing Address	PO BOX 7208				
	KINGSPORT			TN	37664
Relationship:		CITY ▲	S1	ATE 🛦	ZIP CODE ▲
Connecte	ed Organization	Affiliated Committee X J	oint Fundraising Re	presentative	Leadership PAC Spon
Designated Agent: Identi	fy by name, addres	s (phone number – optional)			
	fy by name, addres	s (phone number – optional)			
Full Name	fy by name, addres	s (phone number – optional)			
Full Name		s (phone number – optional)		TE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

r(h). <b>Joint Fundraisi</b> i	ng Participant		
1.	.g . a. tioipaint.	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
GUS BILIRAKIS	VICTORY FUND		
	<sub>I</sub> PO BOX 2485		
Mailing Address	1 0 BOX 2400		
	SPRINGFIELD	L VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	Fundraising Representa	Leadership PAC Spons
		Fundraising Representa	Leadersnip PAC Sponso
Designated Agent: Identif		Fundraising Representa	Leadership PAC Sponso
Designated Agent: Identif		Fundraising Representa	Leadersnip PAC Sponso
Designated Agent: Identif	by by name, address (phone number – optional)		ZIP CODE A
Designated Agent: Identif	by by name, address (phone number – optional)  CITY		
Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or meaning the safety deposit boxes or mea	Teles: List all banks or other depositories in which the aintains funds.  City Bank  2365 W. Broad Street	STATE A ephone Number he committee deposit	ZIP CODE   S funds, holds accounts, rents
Pull Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m  Name of Bank, Classide Depository, etc.	cories: List all banks or other depositories in which the aintains funds.	STATE A ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected BIGGS VICTORY	Organization, Affiliated Committee, Joint Fundra	ising Representative	, or Leadership PAC Sponsor
	BIGGS VICTORY			
	Mailing Address	228 S WASHINGTON STREET		
		SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
3.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	ephone Number	
9.				
	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.	ne committee deposits	s funds, holds accounts, rents
	safety deposit boxes or ma		ne committee deposits	s funds, holds accounts, rents
	Name of Bank, Flushir	intains funds.	ne committee deposits	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	intains funds. ng Bank	ne committee deposits	s funds, holds accounts, rents
	Name of Bank, Depository, etc.	intains funds. ng Bank	ne committee deposits	s funds, holds accounts, rents

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). <b>Joint Fundraisi</b>	3		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	d Organization, Affiliated Committee, Joint Food	undraising Representative	e, or Leadership PAC Spons
WAGNER VICTO			
Mailing Address	PO BOX 183		
	HUDSON	wi	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional		ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optiona		Leadership PAC Spo
Pesignated Agent: Identi  Full Name   Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optiona	l)	
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional line)  CITY ▲  Ories: List all banks or other depositories in which is the state of the s	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposition afety deposit boxes or mailing and maili	fy by name, address (phone number – optional line)  CITY ▲  Ories: List all banks or other depositories in which is the state of the s	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional line)  CITY   Ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification  Full Name	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification  Full Name	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Banks or Other Depositor safety deposit boxes or ma		s or other depositories in			s funds, h	olds accounts, rents
Banks or Other Depositor safety deposit boxes or ma	erce Bank	s or other depositories in			s funds, h	olds accounts, rents
Banks or Other Depositor safety deposit boxes or ma	intains funds.	s or other depositories in			s funds, h	olds accounts, rents
LILITE			Тетерионе	Number		
THEE ON FOSITION			Telephone	Number	-	
TITLE OR POSITION	▼	CITY A		STATE A		ZIP CODE ▲
Mailing Address						
Full Name						
Designated Agent: Identify	by name, addres	s (phone number – optio	nal)			
Connected	I Organization	Affiliated Committee	Joint Fundrais	ng Represent	ative	Leadership PAC Spons
Relationship:		CITY ▲		STATE A		ZIP CODE ▲
	SHIRLEY			ı NY ı	1196	57
Mailing Address	47 FLINTLOCK	. DR				
SALAZAR VICTO	RY COMMIT	TEE 				
Name of Any Connected	Organization, Aff	iliated Committee, Joint	Fundraising R	epresentativ	e, or Lead	ership PAC Sponsor
4.			FEC	ID number	С	
3.			FEC	ID number	C	
2.			FEC	ID number	С	
1			, I FEU	ID number	C	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisii	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
		_	
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
TEAM CHENEY			
	3538 SOUTH WAKEFIELD ST.		
Mailing Address			
	ARLINGTON	VA	22206
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identification  Full Name  Mailing Address	d Organization Affiliated Committee		
Connecte  Designated Agent: Identification  Full Name  Mailing Address	d Organization Affiliated Committee	STATE A	
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	d Organization Affiliated Committee  y by name, address (phone number – optional  CITY A  pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositors  Full Name  Mailing Address	d Organization Affiliated Committee  y by name, address (phone number – optional  CITY A  pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	d Organization Affiliated Committee  y by name, address (phone number – optional  CITY A  pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposited Stafety deposit boxes or make the stafety deposit boxes or m	d Organization Affiliated Committee  y by name, address (phone number – optional  CITY A  pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposites afety deposit boxes or make the safety deposit bo	d Organization Affiliated Committee  y by name, address (phone number – optional  CITY A  Pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposites afety deposit boxes or make the safety deposit bo	d Organization Affiliated Committee  y by name, address (phone number – optional  CITY A  Pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
ELISE VICTORY	FUND		
Mailing Address	PO BOX 500		
	GLEN FALLS	NY	12801
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:				
1.			FEC ID	number	С	
2.			FEC ID	number	С	
3. [			FEC ID	number	С	
4. [			FEC ID	number	С	
	of Any Connected O	Organization, Affiliated Committee, Jo	oint Fundraising Rep	resentative	e, or Leadership PAC	Sponsor
N	Mailing Address	824 S. MILLEDGE AVE STE 101		1 1 1		
	3					
		ATHENS		GA	30605	
F	Relationship:	CITY ▲		STATE A	ZIP COD	E 🛦
	Connected	Organization Affiliated Committee	Joint Fundraising	Representa	ative Leadership I	PAC Sponsor
8. <b>Design</b>	ated Agent: Identify I	by name, address (phone number - o	ptional)			
Full	I Name					
Mai	iling Address				1 1 1 1 1 1	
TI	TLE OR POSITION <b>T</b>	CITY A		STATE A	ZIP CODE	<b>A</b>
			Telephone Nu	umber		
safety of Name of Deposit	or Other Depositoriedeposit boxes or main of Bank, tory, etc.	es: List all banks or other depositories ntains funds.	s in which the commit	tee deposit	s funds, holds account	s, rents
'	maining / tadiooo					
		<u>.</u>		1 1 1		

FEC Form 1S (Revised 02/2017)

. 1			
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
BICE VICTORY C	Organization, Affiliated Committee, Joint Fundre COMMITTEE	aising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 21315		
	OKLAHOMA CITY	l ok l	73156
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify	y by name, address (phone number – optional)		
esignated Agent: Identify	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name   Mailing Address	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposition and the state of Bank,	CITY A  Te  ries: List all banks or other depositories in which	elephone Number	
Full Name      Mailing Address  TITLE OR POSITION	CITY A  Te  ries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or material deposition are of Bank,	CITY A  Te  ries: List all banks or other depositories in which	elephone Number	
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depositors ame of Bank, epository, etc	CITY A  Te  ries: List all banks or other depositories in which	elephone Number	

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 s

Page  $\frac{73}{}$  of  $\frac{183}{}$ 

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	l Organization, Affiliated Committee, Joint Fundi	raising Representativ	e, or Leadership PAC Spon
GARBARINO VI	CTORY FUND		
1			
Mailing Address	PO BOX 101		
	BAYPORT	NY	11705
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee Joint Joint by part of the property of th	t Fundraising Represent	Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or market	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
=	I Organization, Affiliated Committee, Joint Fundr NS VICTORY COMMITTEE	raising Representative	e, or Leadership PAC Spon
DONOLOG GWE			
Mailing Address	824 S MILLEDGE AVE STE 101		
Maining / Idanoss			
	ATHENS	, GA	30605
Dalatianahin			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee    Joint  fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC 5
		Truitulaising nepresent	Leadership PAC 5
esignated Agent: Identi		Truitulaising nepresenta	Leadership PAC S
esignated Agent: Identi		Truitulaising nepresenta	Leadership PAC 5
esignated Agent: Identi		Truitulaising nepresenta	Leadership PAC 5
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundreck ATRIOT DAY JFC	raising Representative	e, or Leadership PAC Spon
2022 FTIASL TF			
Mailing Address	228 S. WASHINGTON STREET		
Maining / Idanooc	SUITE 115		
	ALEXANDRIA	, VA	22314
Relationship:	CITY A		ZIP CODE ▲
Helationship.	CITY	STATE A	ZIP CODE A
	Affiliated Committee   Affiliated Committee   y Joint  y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identing Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identing Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or marked to the content of	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
TDOCX			
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
	CITY ▲	STATE A	ZIP CODE ▲
		loint Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identi	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address	Affiliated Committee   fy by name, address (phone number – optional		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee   fy by name, address (phone number – optional		
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Sanks or Other Depositional afety deposit boxes or make the proposition of Bank, Depository, etc.	Affiliated Committee  fy by name, address (phone number – optional  CITY   CITY   ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Connected  Pesignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit tafety deposit boxes or make the state of Bank,	Affiliated Committee  Ty  Ty  Ty  Ty  Ty  Ty  Ty  Ty  Ty	STATE A  Telephone Number  ich the committee deposi	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION Sanks or Other Depositional afety deposit boxes or make the proposition of Bank, Depository, etc.	Affiliated Committee  fy by name, address (phone number – optional  CITY   CITY   ories: List all banks or other depositories in what intains funds.	STATE A  Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	228 S. WASHINGTON ST.		
Ü	STE. 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jorganization Affiliated Committee X Jorganization Affiliated Committee X Jorganization	oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	oint Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc	cy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

TITLE OR POSITION  Banks or Other Depositor Safety deposit boxes or many Name of Bank, Depository, etc.  Mailing Address	ries: List all banks or other depositories i intains funds.	n which the committee depo	sits funds, holds accounts, rents
Banks or Other Depositor cafety deposit boxes or many same of Bank, Depository, etc.		n which the committee depo	sits funds, holds accounts, rents
Banks or Other Depositor cafety deposit boxes or many same of Bank, Depository, etc.		n which the committee depo	sits funds, holds accounts, rents
Banks or Other Depositor safety deposit boxes or ma		n which the committee depo	sits funds, holds accounts, rents
Banks or Other Depositor		n which the committee depo	sits funds, holds accounts, rents
		a salatah dha a sa sa sa tu sa t	ita farada halda a cara da
TITLE OR POSITION			
TITLE OR POSITION	<u>,,,,,,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Telephone Number	
	▼ CITY ▲	STATE ▲	ZIP CODE ▲
Mailing Address			
Full Name			
	d Organization Affiliated Committee  by by name, address (phone number – opt		ntative Leadership PAC Spo
		■ STATE A  Joint Fundraising Represe	
Relationship:	FALLS CHURCH  CITY	VA STATE 2	
		. \/^	22044
Mailing Address	6269 LEESBURG PIKE		
	2000 1 5500 175 2 717		
Name of Any Connected WAGNER-MCHEI	Organization, Affiliated Committee, Joir NRY VICTORY	nt Fundraising Representat	ive, or Leadership PAC Spons
4.			
		FEC ID number	
3		FEC ID number	
2.		FEC ID number	
2		FEC ID number	

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	C
	_	FEC ID number	C
J		FEC ID number	С
4.		FEC ID number	С
4			
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Spons
MACE MAJORIT	Y FUND		
1			
Mailing Address	824 S MILLEDGE AVE		
	STE. 101	<u> </u>	<u> </u>
	ATHENS	GA	30605
Relationship:	CITY A	STATE ▲ Fundraising Representa	ZIP CODE ▲ ative Leadership PAC Sp
Connecte	CITY A		
esignated Agent: Identi	CITY A ed Organization Affiliated Committee		
Connecte esignated Agent: Identi	CITY A ed Organization Affiliated Committee		
esignated Agent: Identi	CITY A ed Organization Affiliated Committee		ative Leadership PAC Sp
esignated Agent: Identi	CITY A  ed Organization Affiliated Committee   y Joint F  fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	CITY A  ed Organization Affiliated Committee   fy by name, address (phone number – optional)  CITY A		ative Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	CAREY VICTORY	´FUND		
	Mailing Address	824 S MILLEDGE AVE		
		STE 101		
		ATHENS	GA	30605
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.	Decimpoted Asset Identify			
	Designated Agent: Identity	by name, address (phone number - optional)		
	Full Name	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A		
9.	Full Name	CITY   CITY   Te  ies: List all banks or other depositories in which	STATE   STATE   lephone Number	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE   STATE   lephone Number	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION Banks or Other Depositor safety deposit boxes or ma Name of Bank,	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A lephone Number the committee deposits	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching and the pository, etc.	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A lephone Number the committee deposits	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching and the pository, etc.	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A lephone Number the committee deposits	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

anks or Other Depositoratety deposit boxes or material ame of Bank, epository, etc.  Mailing Address	ries: List all banks or other depositor	Telephone		
anks or Other Depositorafety deposit boxes or material ame of Bank, epository, etc.	ries: List all banks or other depositor		Number	
anks or Other Depositorafety deposit boxes or ma	ries: List all banks or other depositor		Number	
anks or Other Deposito	ries: List all banks or other depositor		Number	
TITLE OR POSITION	▼ CITY ▲	Telephone		
TITLE OR POSITION	▼ CITY ▲	Telenhono		
TITLE OF POSITION	_ CITY ▲		SIAIL	
			07475 .	ZIP CODE ▲
				1 , , , , 1-1 , ,
Mailing Address	<u> </u>			<u>                                     </u>
esignated Agent: Identif	by name, address (phone number -	- optional)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	d Organization Affiliated Committe		ng Representa	Leadership PAC Sp
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	ARLINGTON		L	22219
Mailing Address	PO BOX 9891			
	DO DOV 0004			
<u> </u>				
	Organization, Affiliated Committee, ORY COMMITTEE	, Joint Fundraising R	epresentativo	e, or Leadership PAC Spon
4.				
. 1			ID number	C
3.			ID number	С
3		FEC	ID number	С
1		. 20	ID number	

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundrais</b> i	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
MIKE GARCIA V	ICTORY FUND		
	9070 IRVINE CENTER DRIVE #150		
Mailing Address			
	IRVINE	CA	92618
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	ed Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee Joint	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional)	sint Fundraising Represent	
esignated Agent: Identification  Full Name  Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Identification of the second of the secon	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Identification of the connection of the connectio	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE   Telephone Number	ZIP CODE A
esignated Agent: Identification of the comment of t	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE   Telephone Number	ZIP CODE A
esignated Agent: Identification of Bank, Connected Esignated Agent: Identification of Connected Esignated	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE   Telephone Number	ZIP CODE A
esignated Agent: Identification of Bank, Connected Esignated Agent: Identification of Connected Esignated	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE   Telephone Number	ZIP CODE A
esignated Agent: Identification of the composite of the c	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE   Telephone Number	ZIP CODE A
esignated Agent: Identification of the composition	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE   Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(g) or (h). <b>Joint Fundrais</b>	sing Participant:		
1		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
	ed Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 852138		
	MOBILE 	AL	36685
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
00000	cted Organization	. F. dudida Barana	ative Leadership PAC Sponsor
Connec	Allilated Committee 12 John	nt Fundraising Represent	Leadership PAC Sponsor
	atify by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sponsor
. <b>Designated Agent:</b> Iden		t Fundraising Represent	Leadership PAC Sponsor
. <b>Designated Agent:</b> Iden		t Fundraising Represent	Leadership PAC Sponsor
. <b>Designated Agent:</b> Iden			Leadership PAC Sponsor
. <b>Designated Agent:</b> Iden  Full Name  Mailing Address	atify by name, address (phone number – optional)		
. <b>Designated Agent:</b> Iden	otify by name, address (phone number – optional)  Litify by name, address (phone number – optional)  CITY ▲		
Full Name Mailing Address  TITLE OR POSITIO Banks or Other Depositions afety deposit boxes or Name of Bank,	itories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositions safety deposit boxes or Name of Bank, Depository, etc.	itories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITIO Banks or Other Depositions afety deposit boxes or Name of Bank,	itories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositions safety deposit boxes or Name of Bank, Depository, etc.	itories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM MOORE J	OINT FUNDRAISING COMMITTEE		
Mailing Address	370 EAST SOUTH TEMPLE STE 580		
	SALT LAKE CITY	UT	84111
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identing Full Name  Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b> n	g Participant:		
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponsor
LI L			
Mailing Address	PO BOX 30844		
	BETHESDA		20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization	nt Fundraising Representa	ative Leadership PAC Spon
Full Name			
TITLE OR POSITION	CITY A	STATE A	ZIP CODE ▲
		Telephone Number	
Banks or Other Deposito safety deposit boxes or ma Name of Bank, Depository, etc.  Mailing Address	ries: List all banks or other depositories in which aintains funds.	n the committee deposit	s funds, holds accounts, rents

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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
NEHLS VICTOR	Y 		
	∣ 1612 CRABB RIVER RD		
Mailing Address			
	RICHMOND	TX	77469
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	Leadership PAC Sp
	Affiliated Committee X Jo	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or m  ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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1			1 , , , , , 1-1 , ,
	<u>                                     </u>	<u> </u>	
ories: List all banks o aintains funds.	r otner aepositories in whic	n the committee deposit	s runds, noids accounts, rents
wien, Lint all hander -	ar other deposits in the	oh the committee decree	to fundo holdo coccumto marte
		Telephone Number	
I <b>▼</b>	CITY ▲	STATE ▲	ZIP CODE ▲
y by name, address	(phone number – optional)		
d Organization	Affiliated Committee	int Fundraising Represent	ative Leadership PAC Spo
	CITY A	STATE A	ZIP CODE ▲
AMARILLO		TX	79159
PO BOX 51522			
Organization, Affilia	ated Committee, Joint Fur	draising Representative	e, or Leadership PAC Sponso
			U
			C
			C
		FEC ID number	C
	PO BOX 51522  AMARILLO  Ad Organization  fy by name, address	PO BOX 51522  AMARILLO  CITY   Ad Organization Affiliated Committee   Jo  Ty by name, address (phone number – optional)  CITY   CITY   CITY   CITY   CITY   CITY   CITY   The control of t	FEC ID number FE

FEC Form 1S (Revised 02/2017)

1.						
· · ·				FEC ID number	C	
2				FEC ID number	С	
3.				FEC ID number	С	
4.				FEC ID number	С	
		rganization, Affiliated Commit	tee, Joint Fundrai	sing Representative	e, or Leadership PAC Spo	nsor
Mai	ling Address	12000 STARCREST DR				
		SAN ANTONIO		TX	78247	
				STATE A	ZIP CODE ▲	
Rel:	ationship:  Connected C	CITY A		Fundraising Represent		Sponso
<b>Designate</b> Full N	Connected Connec		mittee <b>X</b> Joint F			Sponsc
<b>Designate</b> Full N	Connected C	Organization Affiliated Com	mittee <b>X</b> Joint F			Sponsc
<b>Designate</b> Full N	Connected Connec	Organization Affiliated Com	mittee <b>X</b> Joint F		ative Leadership PAC	Sponsc
<b>Designate</b> Full N	Connected Connec	Affiliated Company name, address (phone numbers)	mittee	Fundraising Represent	ative Leadership PAC	
<b>Designate</b> Full N Mailin	Connected Connec	y name, address (phone numb	mittee	Fundraising Represent	ative Leadership PAC	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.			FEC ID nu	umber	C
2.			FEC ID nu	umber	C
3.			FEC ID nu	umber	C
4.			FEC ID nu	umber	С
ame of Any Connected	Organization, A	ffiliated Committee, Joint F	undraising Repres	entative	, or Leadership PAC Spon
SHEDD VICTOR	Y FUND			1 1	
Mailing Address	PO BOX 365				
			1 1	VA	22101
	MCLEAN				
	d Organization		Joint Fundraising Re	TATE ▲	ZIP CODE ▲ tive Leadership PAC Sp
Connecte	d Organization		Joint Fundraising Re		
Connecte esignated Agent: Identif	d Organization	Affiliated Committee	Joint Fundraising Re		
Connecte esignated Agent: Identif	d Organization	Affiliated Committee	Joint Fundraising Re		
connecte esignated Agent: Identif	d Organization  y by name, addre	Affiliated Committee	Joint Fundraising Re		Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	d Organization  y by name, addre	Affiliated Committee	Joint Fundraising Re	epresentar	Leadership PAC Sp
connecte esignated Agent: Identif	d Organization  y by name, addre	Affiliated Committee	Joint Fundraising Re	epresentat	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

5(g) (	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraid	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	9070 IRVINE CENTER DRIVE		
		SUITE 150	, CA,	92618
	Relationship:	CITY A	STATE A	ZIP CODE A
			undraising Representa	
8.		by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tele	phone Number	
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which th intains funds.	e committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.		e committee deposit	s funds, holds accounts, rents
9.	safety deposit boxes or ma		e committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.		e committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.		e committee deposit	s funds, holds accounts, rents

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint F	undraising Representative	e, or Leadership PAC Sponse
Mailing Address	75 S HIGH ST		
	STE. 4		
	DUBLIN	ОН	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	y by name, address (phone number – optiona	<b>I)</b>	
	y by name, address (phone number – optiona	<b>I)</b>	
Full Name	y by name, address (phone number – optiona	i)	
Full Name	y by name, address (phone number – optiona	n)	
Full Name	CITY	STATE A	ZIP CODE A
Full Name	CITY		ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY A  pries: List all banks or other depositories in w	STATE A Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A  pries: List all banks or other depositories in w	STATE A Telephone Number	

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r	1	EEC ID sumbar	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
HOUSE MAJORI	TY TRUST		
Mailing Address	228 S WASHINGTON STREET SUITE 115		
	ALEXANDRIA	, ,   VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
WOMACK MAJOR	RITY FUND		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	, ,   VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
	Organization Affiliated Committee X Joint by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
		t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identify		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identify		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identify	by name, address (phone number – optional)	t Fundraising Represent	
Pesignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Spo
Pesignated Agent: Identify	by name, address (phone number – optional)  CITY		
Pesignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:			
	1		FEC	ID number	C
	2.		FEC	ID number	C
	3		FEC	ID number	C
	4		FEC	ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fun	draising Re	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844			
		BETHESDA		MD	20824
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	int Fundraisii	ng Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)			
	Full Name				
	Mailing Address				
					I I-I
	TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
			Telephone I	Number _	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in whice intains funds.	ch the comm	nittee deposi	ts funds, holds accounts, rents
	Mailing Address				
	ag / tdu/000				
			, , , 1		
		CITY A		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected BRADY VICTORY	Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
Mailing Address	8505 TECHNOLOGY FOREST PLACE		
	SUITE 702		
	THE WOODLANDS	_   TX	77381
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	d Organization	ndraising Representa	tive Leadership PAC Spon
Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
Designated Agent: Identify			
Designated Agent: Identify  Full Name			
Designated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)	STATE A	ZIP CODE A
Designated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main terms.	by name, address (phone number – optional)  CITY   Telep  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	by name, address (phone number – optional)  CITY   Telep  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main terms.	by name, address (phone number – optional)  CITY   Telep  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A
Pull Name Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, Depository, etc.	by name, address (phone number – optional)  CITY   Telep  ries: List all banks or other depositories in which the	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraising</b>	Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrai	sing Representati	ve, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON STREET		
		SUITE 115 ALEXANDRIA	VA	22314
	Relationship:	CITY ▲	STATE 4	ZIP CODE A
	Connected	Organization Affiliated Committee X Joint F	undraising Represer	ntative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
		1		
				I I-I
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
			ephone Number	
9.	Banks or Other Depositori safety deposit boxes or main Name of Bank, Depository, etc.	es: List all banks or other depositories in which the ntains funds.	e committee depos	sits funds, holds accounts, rents
	Mailing Address			
	5			
ı		CITY A	STATE ▲	ZIP CODE ▲

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisin</b>	3 · ······		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
NUNES VICTORY	Y FUND		
Mailing Address	PO BOX 6545		
	VISALIA	CA	93290
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify  Full Name    Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail ame of Bank,	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or malame of Bank, epository, etc	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundrais</b> i	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
NRSC/NRCC VI	CTORY COMMITTEE		
MANUS AND SAN	228 S WASHINGTON STREET #115		
Mailing Address			
	ALEXANDRIA		20244
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee X Join	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Ident	ify by name, address (phone number – optional)	t rundraising riepresent	Leadership FAC 3
esignated Agent: Ident		Trundialing represent	Leadership FAC 5
esignated Agent: Ident		Trundalsing Represent	Leadership FAC 5
esignated Agent: Ident		Truncialing represent	Leadership FAC 5
esignated Agent: Ident	ify by name, address (phone number – optional)		
esignated Agent: Ident	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY		
Full Name Mailing Address	ify by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or necessarily and the second	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected HUDSON FREED	Organization, Affiliated Committee, Joint Fundra	ising Representativ	re, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON ST STE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint	Fundraising Represent	tative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	ephone Number	
9.	Name of Bank,	ies: List all banks or other depositories in which t intains funds.	he committee deposi	ts funds, holds accounts, rents
	Depository, etc.			
	Mailing Address			
		CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.  Mailing Address	ries: List all banks aintains funds.	or other depositories in wl	Telephone Number	psits funds, hol	ds accounts, rents
Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks aintains funds.	or other depositories in wl		psits funds, hol	ds accounts, rents
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks aintains funds.	or other depositories in wl		psits funds, hol	ds accounts, rents
Banks or Other Deposito	ries: List all banks aintains funds.	or other depositories in wl		psits funds, hol	ds accounts, rents
TITLE OR POSITION			Telephone Number		
TITLE OR POSITION			Telephone Number		
TITLE OR POSITION	•				
		CITY A	STATE A		ZIP CODE A
			1 1 .	<u> </u>	
Mailing Address					
Full Name					
Designated Agent: Identify	/ by name, address	s (phone number – optiona	))		
Connected	d Organization		Joint Fundraising Represe		eadership PAC Spon
Relationship:	, 1270 (140) (174	CITY A	STATE		ZIP CODE ▲
	ALEXANDRIA		ı ı VA		
Mailing Address	228 S WASHING	GTON ST STE 115			
STIVERS VICTOR					
Name of Any Connected	Organization, Affi	liated Committee, Joint Fo	undraising Representa	tive. or Leade	rship PAC Sponso
4.			FEC ID numbe	r C	
			」 │ FEC ID numbe		
3.			FEC ID numbe		
1					

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or material safety deposit boxes or material safety depository, etc.  Mailing Address	ries: List all banks		STATE A Telephone Number	zip code 🛦
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ries: List all banks		Telephone Number	
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ries: List all banks		Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	ries: List all banks		Telephone Number	
Banks or Other Deposito	ries: List all banks		Telephone Number	
			Telephone Number	
TITLE OR POSITION	<b>V</b>	1	1	ZIP CODE A
TITLE OR POSITION	<b>▼</b>	CITY A	STATE ▲	ZIP CODE ▲
	1			
Mailing Address				
Full Name				
Designated Agent: Identify	y by name, address	s (phone number – optional)		
Connected	d Organization	Affiliated Committee X Join	nt Fundraising Representa	ative Leadership PAC Spo
Relationship:		CITY A	STATE A	ZIP CODE ▲
	ALEXANDRIA		VA	22314
Mailing Address				
	228 S WASHING	GTON STREET STE 115		
Name of Any Connected			draising Representative	e, or Leadership PAC Sponso
4			FEC ID number	C
. 1			FEC ID number	C
3.			FEC ID number	C

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

<b>-1</b>		FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	[C]
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
SCALISE LEADER	RSHIP FUND		
Mailing Address	PO BOX 9891		
	ARLINGTON	, ,   VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number - optional)		
Full Name			1
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
	•	STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITION  anks or Other Depositor	ries: List all banks or other depositories in which	elephone Number	
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	ries: List all banks or other depositories in which	elephone Number	
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	ries: List all banks or other depositories in which	elephone Number	
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or maintain ame of Bank, epository, etc.	ries: List all banks or other depositories in which	elephone Number	

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Page  $\underline{^{103}}$  of  $\underline{^{183}}$ 

(h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponso
MCCAUL VICTO	RY FUND		
Mailing Address	PO BOX 341027		
	AUSTIN		78734
		STATE ▲	ZIP CODE ▲
Relationship:	CITY A  d Organization Affiliated Committee	Fundraising Representa	
Connecte			
Connecte	d Organization Affiliated Committee		
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		
Connecte  Designated Agent: Identif	d Organization Affiliated Committee		Leadership PAC Spo
Connecte  Designated Agent: Identification  Full Name  Mailing Address	Affiliated Committee   Joint  y by name, address (phone number – optional)		
Connecte  Designated Agent: Identif	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY	Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY   CITY   Te	Fundraising Representation	Leadership PAC Spo

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
WRIGHT VICTO	RY FUND		
	<sub>I</sub> 75 S HIGH ST		
Mailing Address			
	STE. 4		
	DUBLIN 	OH OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
esignated Agent: Identi	ed Organization Affiliated Committee	nt Fundraising Representation	Leadership PAC Sport
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee	nt Fundraising Representation	
esignated Agent: Identi	Affiliated Committee  X Join  To provide the description of the provided Affiliated Committee  X Join  To provide the provided Affiliated Committee  X Join  To provided Affiliated Committee  X Join  To provide the provided Affiliated Committee  X Join  To provide		
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  X Join  To provide the description of the provided Affiliated Committee  X Join  To provide the provided Affiliated Committee  X Join	STATE A	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	Affiliated Committee  Affiliated Committee  Solve Join  Affiliated Committee  CITY  CITY  CITY  CITY  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  Affiliated Committee  Solve Join  Affiliated Committee  CITY  CITY  CITY  CITY  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	Affiliated Committee  Affiliated Committee  Solve Join  Affiliated Committee  CITY  CITY  CITY  CITY  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee  Affiliated Committee  Solve Join  Affiliated Committee  CITY  CITY  CITY  CITY  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Solve Join  Affiliated Committee  CITY  CITY  CITY  CITY  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Solve Join  Affiliated Committee  CITY  CITY  CITY  CITY  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	•		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	a or Leadership PAC Spon
=	TJOINT FUNDRAISING COMMITTEE		c, or reducising the open
Mailing Address	PO BOX 752		
	RIFLE	, , , CO	81652
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization	Fundraising Representa	ative Leadership PAC S
	Affiliated Committee	Fundraising Representa	ative Leadership PAC S
		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi		Fundraising Representa	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
FALLON VICTOR	RY FUND		
Mailing Address	PO BOX 3653		
	DUBLIN	OH	43016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e. or Leadership PAC Spon
NUNES LEADER	_		
	<sub> </sub> P.O. BOX 6545		
Mailing Address			
	MEALIA		03300
	VISALIA	CA	93290
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee    Joint  fy by name, address (phone number – optional)	t Fundraising Representa	tive Leadership PAC Sp
		Trundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Trundraising Representation	Leadership PAC S
esignated Agent: Identi		Trundraising Representation	Leadership PAC S
esignated Agent: Identi		Trundraising Representation	Leadership PAC S
esignated Agent: Identi	ify by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification of the property of the propert	ify by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisi</b> r		FFO ID	C
1.		FEC ID number	
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
BETH VICTORY	FUND		
Mailing Address	PO BOX 630167		
	IRVING		75063
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	by by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank,	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

4		FEC ID number	C
1.		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
VICTORY 2022			
Mailing Address	22780 INDIAN CREEK DRIVE, STE 100		
	DULLES	VA VA	20166
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	fy by name, address (phone number – optional)	Trundraising nepresent	Leadership PAC S
esignated Agent: Ident		Trundraising nepresent	Leadership PAC S
esignated Agent: Ident		Trundraising Represented	Leadership PAC S
esignated Agent: Ident		Trundraising Represented	Leadership PAC S
esignated Agent: Ident	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	ve, or Leadership PAC Spon
FISCHBACH VIC	TORY FUND		
	1 824 S MILLEDGE AVE		
Mailing Address	ST 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		oint Fundraising Represen	tative Leadership PAC S
Connecte			tative Leadership PAC S
Connecte	d Organization Affiliated Committee		tative Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee		tative Leadership PAC S
Connecte esignated Agent: Identif	Affiliated Committee x		
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee x  Ty by name, address (phone number – optional		Leadership PAC S
Connecte esignated Agent: Identif	Affiliated Committee x  Ty by name, address (phone number – optional	STATE A	
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee x  Ty by name, address (phone number – optional		
connecte esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y  Ty by name, address (phone number – optional	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of the properties of the propertie	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite  afety deposit boxes or mane of Bank,	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite  affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite  affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  y  y  y  y  y  y  CITY  CITY  CITY  Dries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

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h). <b>Joint Fundrais</b> ii	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
HICE FREEDOM	i <b>FUND</b> 		
	1 2470 DANIELLS BRIDGE ROAD		
Mailing Address			
	SUITE 121		
	ATHENS	GA L	30606
Deletionahin	OITV A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
Connecte			ative Leadership PAC Sp
Connecte esignated Agent: Identif	ed Organization Affiliated Committee		Leadership PAC Spo
esignated Agent: Identif	ed Organization Affiliated Committee		Leadership PAC Spi
esignated Agent: Identif	Affiliated Committee Join Join with the Join Affiliated Committee Join fy by name, address (phone number – optional)		
esignated Agent: Identification  Full Name Mailing Address	Affiliated Committee Join Join Market State of the Affiliated Committee Join Market State of the Affiliated Commit		Leadership PAC Spanish
esignated Agent: Identif	Affiliated Committee  Affiliated Committee  Figure 1. Join 1.	t Fundraising Representa	
esignated Agent: Identification  Full Name Mailing Address	Affiliated Committee  Affiliated Committee  Figure 1. Join 1.	t Fundraising Representation	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	Affiliated Committee  Affiliated Committee  Typical Distriction  Typical Distriction  Affiliated Committee  Typ	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  Affiliated Committee  Typical Distriction  Typical Distriction  Affiliated Committee  Typ	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	Affiliated Committee  Affiliated Committee  Typical Distriction  Typical Distriction  Affiliated Committee  Typ	STATE A	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee  Affiliated Committee  Typical Distriction  Typical Distriction  Affiliated Committee  Typ	STATE A	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Typical Distriction  Typical Distriction  Affiliated Committee  Typ	STATE A	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Typical Distriction  Typical Distriction  Affiliated Committee  Typ	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi		FEC ID number	С
1.		FEC ID number	C
2.			C
3.		FEC ID number	
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spon
	ER - FUTURE 1ST COMMITTEE		-,
Mailing Address	P.O. BOX 2381		
, and the second			
	OTTAWA	, IL ,	61350
Relationship:	CITY ▲	STATE A	ZIP CODE A
riolationiomp.	OII I	SIAIL	211 0002
	Affiliated Committee	Fundraising Represent	ative Leadership PAC S
		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or n	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi			
1.		FEC ID number	С
2		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint F	undraising Representati	ve, or Leadership PAC Spons
EMMER VICTOR	RY COMMITTEE		
	224.2 MILLEDGE AVENUE		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecto	ed Organization Affiliated Committee   fy by name, address (phone number – optional	Joint Fundraising Represen	tative Leadership PAC Spo
Connecto			tative Leadership PAC Spo
Connecte  Connecte  Connecte  Connecte  Connecte  Connecte			Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name			Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name			Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	fy by name, address (phone number – optiona		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optiona	i)	
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional line) file (phone number	STATE A	
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit	fy by name, address (phone number – optional distribution)  CITY ▲  Ories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or mailing agents.	fy by name, address (phone number – optional distribution)  CITY ▲  Ories: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit	fy by name, address (phone number – optional content of the conten	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit bafety deposit boxes or make the safety deposit boxes or m	fy by name, address (phone number – optional content of the conten	STATE A  Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – optional content of the conten	STATE A  Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	fy by name, address (phone number – optional content of the conten	STATE A  Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 114 of 183

TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma		or other depositories in whi			s, holds accounts, ren
TITLE OR POSITION			relephone Numb	er LLL	-       -
TITLE OR POSITION		1	Telephone Numb	1	
	▼	CITY A	STAT	E 🛦	ZIP CODE ▲
Mailing Address					
Full Name					
		Affiliated Committee	oint Fundraising Re	presentative	Leadership PAC Sp
Relationship:		CITY ▲		ATE A	ZIP CODE ▲
Delet's cold	WARRENTON				0186
	#303				
Mailing Address	332 W. LEE HIGH	IWAY			
MULLIN VICTOR	Y FUND				
		ated Committee, Joint Fu	ndraising Represe	entative, or L	eadership PAC Spon
4			FEC ID nu	mber C	
3.			FEC ID nu		
			FEC ID nu		
2.			FEC ID nu		

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraising	i di dopant.				
1.				C ID number	С
2.			FE	C ID number	C
3.			FE	C ID number	С
4.			FE	C ID number	С
		Committee, Joint	Fundraising	Representativ	e, or Leadership PAC Spor
TAKE BACK THE	HOUSE 2020				
Mailing Address	PO BOX 30844				
	BETHESDA			MD	20824
Relationship:		CITY A		STATE A	ZIP CODE ▲
	Organization Affiliate			aising Represent	lative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliate			aising Represent	Leadership PAC S
esignated Agent: Identify	Organization Affiliate			aising Represent	Leadership PAC S
esignated Agent: Identify  Full Name	Organization Affiliate			aising Represent	Leadership PAC S
esignated Agent: Identify  Full Name	Organization Affiliate	ne number – option	nal)		Leadership PAC S
esignated Agent: Identify  Full Name	Organization Affiliate by name, address (phon	ne number – option	nal)		
esignated Agent: Identify  Full Name  Mailing Address	Organization Affiliate by name, address (phon	ne number – option	nal)		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoriatety deposit boxes or mainage and mainage	Organization Affiliate by name, address (phon	ne number – option	Telephor	STATE A	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor aftety deposit boxes or mail ame of Bank, epository, etc.	Organization Affiliate by name, address (phon	ne number – option	Telephor	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoriatety deposit boxes or mainage and mainage	Organization Affiliate by name, address (phon	ne number – option	Telephor	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor aftety deposit boxes or mail ame of Bank, epository, etc.	Organization Affiliate by name, address (phon	ne number – option	Telephor	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). <b>Joint Fundrais</b> ii	ng Participant:			
1.		FEC I	D number	C
2.		FEC I	D number	C
3.		FEC I	D number	C
4.		FEC I	D number	C
	Organization, Affiliated Committee, Joint	Fundraising Re	presentat	ive, or Leadership PAC Spo
FRIENDS OF BU	RCHETT			
			1 1 1	
	<sub>I</sub> 95 WHITE BRIDGE RD			
Mailing Address				
	SUITE 207			
	NASHVILLE		TN	37205
Relationship:	CITY ▲		STATE A	▲ ZIP CODE ▲
Connecte		Joint Fundraisin	ng Represe	ntative Leadership PAC
Connecte esignated Agent: Identif	Affiliated Committee		ng Represe	ntative Leadership PAC
Connecte			ng Represe	ntative Leadership PAC
Connecte esignated Agent: Identif			ng Represe	ntative Leadership PAC
Connecte esignated Agent: Identif	y by name, address (phone number – optio			
esignated Agent: Identification	by by name, address (phone number – option		ng Represe	
esignated Agent: Identification  Full Name Mailing Address	by by name, address (phone number – option		STATE A	
esignated Agent: Identification  Full Name  Mailing Address	by by name, address (phone number – option	nai)	STATE A	
esignated Agent: Identification of the connected agent and a series of the connected and a series of the connected agent and a series of the connected agent and a series of the connected agent agent agent agent and a series of the connected agent	y by name, address (phone number – option    CITY ▲  CITY ▲  Pries: List all banks or other depositories in	nal)  Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification of the control of t	y by name, address (phone number – option    CITY ▲  CITY ▲  Pries: List all banks or other depositories in	nal)  Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – option    CITY ▲  CITY ▲  Pries: List all banks or other depositories in	nal)  Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – option    CITY ▲  CITY ▲  Pries: List all banks or other depositories in	nal)  Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification of Bank, epository, etc.	y by name, address (phone number – option    CITY ▲  CITY ▲  Pries: List all banks or other depositories in	nal)  Telephone I	STATE A	ZIP CODE A
esignated Agent: Identification of Bank, epository, etc.	y by name, address (phone number – option    CITY ▲  CITY ▲  Pries: List all banks or other depositories in	nal)  Telephone I	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 117 of 183

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spon
KELLER VICTOR	RY COMMITTEE		
Mailing Address	4031 THICKET LANE		
	HARRISBURG	PA PA	17110
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
•			
Connecte	ed Organization Affiliated Committee X Joinfy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or maneral contents.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 118 of 183

h). <b>Joint Fundraisi</b>		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
JUDGE CARTER	R VICTORY FUND		
Mailing Address	22780 INDIAN CREEK DR.		
Mailing Address	SUITE 100		
	DULLES	, VA	20166
Relationship:			
neialionship.	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 119 of 183

(h). <b>Joint Fundraisi</b>	• ,			
1.		FEC ID nun	nber C	
2		FEC ID nun	nber C	
3.		FEC ID nun	nber C	
4.		FEC ID nun	nber C	
Name of Any Connected	l Organization, Affiliated Committee, Joint	Fundraising Represe	ntative, or L	eadership PAC Sponse
ASHLEY HINSO	N VICTORY COMMITTEE			
	D.O. DOV 044007			
Mailing Address	P.O. BOX 341027			
	AUSTIN		TX 7	8734
Relationship:	CITY ▲	STA	TE 🛦	ZIP CODE ▲
	Affiliated Committee  Affiliated Committee  fy by name, address (phone number – option	Joint Fundraising Rep	resentative	Leadership PAC Spo
			resentative	Leadership PAC Spo
Designated Agent: Identi			resentative	Leadership PAC Spo
Designated Agent: Identi			resentative	Leadership PAC Spo
Designated Agent: Identi			resentative	Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – option			Leadership PAC Spo
Designated Agent: Identi  Full Name   Mailing Address  TITLE OR POSITION	fy by name, address (phone number – option	al)		
Designated Agent: Identi  Full Name   Mailing Address  TITLE OR POSITION	fy by name, address (phone number – option	al)		
Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in v	al) STAT	E <b>A</b>	ZIP CODE A
Designated Agent: Identi  Full Name	fy by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in v	al) STAT	E <b>A</b>	ZIP CODE A
Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in viaintains funds.	al) STAT	E A leposits funds	ZIP CODE A
Pesignated Agent: Identi  Full Name	fy by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in viaintains funds.	al)  STAT	E A leposits funds	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in viaintains funds.	al)  STAT	E A leposits funds	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – option  CITY   CITY   pries: List all banks or other depositories in viaintains funds.	al)  STAT	E A leposits funds	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address	h). <b>Joint Fundraisi</b>	ng Participant:		
3.	1.		FEC ID numbe	r C
A. FEC ID number  Clame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S WIN IN 2020  Mailing Address  320 FIRST STREET SOUTHEAST  WASHINGTON  CITY A STATE A ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PA  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY A STATE A ZIP CODE A  TITLE OR POSITION   CITY A STATE A ZIP CODE A	2.		FEC ID numbe	r C
Iame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S WIN IN 2020  Mailing Address  320 FIRST STREET SOUTHEAST  WASHINGTON  CITY ▲ STATE ▲ ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PA  Resignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲	3.		FEC ID numbe	r C
WIN IN 2020  Mailing Address  320 FIRST STREET SOUTHEAST  WASHINGTON  CITY ▲ STATE ▲ ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PA  Pesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲	4.		FEC ID numbe	r C
WIN IN 2020  Mailing Address  320 FIRST STREET SOUTHEAST  WASHINGTON  CITY ▲ STATE ▲ ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PA  Pesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲				
Mailing Address  320 FIRST STREET SOUTHEAST  WASHINGTON  Relationship:  CITY ▲ STATE ▲ ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PA  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲ STATE ▲ ZIP CODE ▲		Organization, Affiliated Committee, Joint F	Fundraising Representa	tive, or Leadership PAC Spons
Mailing Address  WASHINGTON  Relationship:  CITY ▲ STATE ▲ ZIP CODE  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PA  Pesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲	WIN IN 2020			
Mailing Address  WASHINGTON  Relationship:  CITY ▲ STATE ▲ ZIP CODE  Connected Organization Affiliated Committee   Joint Fundraising Representative Leadership PA  Pesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲				
Relationship:  CITY A STATE A ZIP CODE  Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PA  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY A STATE A ZIP CODE A  ZIP CODE A  ZIP CODE A	Mailing Address	320 FIRST STREET SOUTHEAST		
Relationship:  CITY A STATE A ZIP CODE  Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA  resignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY A STATE A ZIP CODE A  TITLE OR POSITION   ZIP CODE A	Ü			
Connected Organization  Affiliated Committee		WASHINGTON	, DC	20003
Connected Organization  Affiliated Committee	Relationship:	CITY A	STATE	
esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY   STATE   ZIP CODE	•	•··· <del>-</del>	0.7.1.2	
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲				entative Leadership PAC Sp
TILE OR POSITION ▼	esignated Agent: Identif			entative Leadership PAC Sp
TILE OR POSITION ▼	esignated Agent: Identif			entative Leadership PAC Sp
TILE OR POSITION ▼	esignated Agent: Identif			entative Leadership PAC Sp
	esignated Agent: Identif	y by name, address (phone number – options	al)	
	esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – options	al)	
	esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – options	al)  STATE	
	gnated Agent: Identification of the control of the	y by name, address (phone number – options)  CITY   CITY   pries: List all banks or other depositories in w	STATE A	ZIP CODE A
afety deposit boxes or maintains funds.	esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Deposito	y by name, address (phone number – options)  CITY   CITY   pries: List all banks or other depositories in w	STATE A	ZIP CODE A
ame of Bank,	esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank,	y by name, address (phone number – options)  CITY   CITY   pries: List all banks or other depositories in w	STATE A	ZIP CODE A
lame of Bank,	esignated Agent: Identification Full Name	y by name, address (phone number – options)  CITY   CITY   pries: List all banks or other depositories in w	STATE A	ZIP CODE A
afety deposit boxes or maintains funds.  Iame of Bank, Depository, etc.  Mailing Address	esignated Agent: Identification Full Name	y by name, address (phone number – options)  CITY   CITY   pries: List all banks or other depositories in w	STATE A	ZIP CODE A
lame of Bank, pepository, etc.	esignated Agent: Identification Full Name	y by name, address (phone number – options)  CITY   CITY   pries: List all banks or other depositories in w	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 121 of 183

h). <b>Joint Fundraisi</b>	ng Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
THE VALADAO	VICTORY FUND		
	ı 5132 N PALM AVE		
Mailing Address			
	NUM 227		
	FRESNO	CA	93704
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC S
Connecte	Affiliated Committee	nt Fundraising Representa	ative Leadership PAC S
Connecte esignated Agent: Identi Full Name		nt Fundraising Representa	ative Leadership PAC S
Connecte		nt Fundraising Representa	Leadership PAC S
Connecte esignated Agent: Identi Full Name		nt Fundraising Representa	
Connecte esignated Agent: Identi Full Name	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
Connecte esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of the content	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spor
TAKE BACK THE	E HOUSE CALIFORNIA 2020		
Mailing Address	P.O. BOX 30844		
maining / taurooc			
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC S
	fy by name, address (phone number – optional)		
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi			
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   Te  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   Te  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   Te  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   Te  Dries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) c	or(h). <b>Joint Fundraisin</b> ç	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Panrasantativ	or Leadership PAC Spensor
0.		HOUSE TEXAS 2020	ising hepresentative	s, or Leadership FAO Sponsor
	Mailing Address	P.O. BOX 30844		
		BETHESDA	MD MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
8. 9.	Full Name Mailing Address  TITLE OR POSITION	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A  Tele  Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundrais</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected LONG TEAM	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
LONGTEAN			
Mailing Address	P.O. BOX 3864		
Mailing Address			
	SPRINGFIELD	, MO	65808
Dalara akt			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Join	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	STATE	
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional)  CITY   T	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of the content of the	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite the deposite boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1			FEC ID number	C
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
ame of Any Connected	Organization, Affiliated Co	mmittee, Joint Fund	raising Representativ	re, or Leadership PAC Spons
AUSTIN SCOTT	/ICTORY FUND			
Mailing Address	824 S. MILLEDGE AVENU	JE 		
	SUITE 101			
			ı ı GA ı	30605
	ATHENS			
	CI Organization Affiliated		STATE   Fundraising Represen	
Connected	CI	Committee X Join	STATE A	
Connected esignated Agent: Identify	CI Organization Affiliated	Committee X Join	STATE A	
Connected esignated Agent: Identify Full Name	CI Organization Affiliated	Committee X Join	STATE A	
Connected esignated Agent: Identify Full Name	CI Organization Affiliated  by name, address (phone	Committee X Join	STATE A	Leadership PAC Sp
esignated Agent: Identify  Full Name  Mailing Address	CIT CIT	Committee Join	STATE A	
Connected esignated Agent: Identify Full Name	CIT CIT	Committee Join	STATE A	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b> ç	p Participant:			
	1		FEC	ID number	C
	2.	<u> </u>	FEC	ID number	C
	3.		FEC	ID number	C
	4		FEC	ID number	С
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint F	Fundraising Re	epresentativ	e, or Leadership PAC Sponsor
		D.O. DOV.00044			
	Mailing Address	P.O. BOX 30844			
		BETHESDA	1	MD I	20824
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraisi	ng Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional	al)		
	Full Name				
	Mailing Address				
		1			
			1		1
	TITLE OR POSITION	_ CITY ▲		STATE ▲	ZIP CODE ▲
	LILE OR POSITION	• • • • • • • • • • • • • • • • • • • •	Telephone	Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.  Mailing Address	ies: List all banks or other depositories in water name of the state o	hich the comn	nittee deposit	s funds, holds accounts, rents
	mailing Address				
			1		
ı		CITY A		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM MURPHY			
	PO BOX 97275		
Mailing Address	100000000000000000000000000000000000000		
	RALEIGH	NC NC	27624
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Joint Joint fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisir			.   FEC II	O number	С
1				D number	С
2.					C
3.				O number	
4.			FEC II	O number	C
		ted Committee, Joint	Fundraising Re	presentativ	e, or Leadership PAC Spon
HUDSON VICTO	RY FUND				
Mailing Address	824 S. MILLEDGE	AVE	1 1 1 1		
	SUITE 101				
	ATHENS			GA	30605
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization	Affiliated Committee	Joint Fundraisin	n Renresent:	ative Leadershin PAC S
			Joint Fundraisin	g Represent	ative Leadership PAC S
Connecte esignated Agent: Identif				g Represent	Leadership PAC S
esignated Agent: Identif				g Represent	Leadership PAC S
esignated Agent: Identif				g Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (		nal)	g Represent	Leadership PAC S
esignated Agent: Identif	y by name, address (	phone number – option	nal)	g Representa	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (	phone number — option	nal)	STATE A	
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions.	y by name, address (	(phone number – option	Telephone N	STATE A	
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (	(phone number – option	Telephone N	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions.	y by name, address (	(phone number – option	Telephone N	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (	(phone number – option	Telephone N	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	.g . a. a		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
	I Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Spon
TEAM BUDDY			
Mailing Address	824 S. MILLEDGE AVE		
Mailing Address	SUITE 101		
	ATHENS	, GA	30605
Deletion dele			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee  Join  Join   fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identii		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	STATE	
esignated Agent: Identification Full Name Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identif	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION   anks or Other Depositor	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page  $\underline{^{130}}$  of  $\underline{^{183}}$ 

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
NORTH TO THE	FUTURE		
	<sub>1</sub> PO BOX 2814		
Mailing Address	FO BOX 2014		
	SEWARD	AK	99664
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Spo
	Affiliated Committee Join  fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
Pesignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC Spo
Pesignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or mailing and a second control of the control of t	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Idention Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit afety deposit boxes or make the control of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the state of Bank, Depository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the state of Bank, Depository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
KUSTOFF VICTO	DRY FUND		
Mailing Address	1661 AARON BRENNER DR		
	SUITE 300		
	MEMPHIS	TN	38120
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Represent	ative Leadership PAC S
Connecte		Fundraising Represent	ative Leadership PAC S
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC S
Connecte	ed Organization Affiliated Committee	Fundraising Represent	Leadership PAC S
Connecte esignated Agent: Identif	ed Organization Affiliated Committee	Fundraising Represent	Leadership PAC S
Connecte esignated Agent: Identif	ed Organization Affiliated Committee		Leadership PAC S
Connecte esignated Agent: Identif	Affiliated Committee  Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)		
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)  CITY		
Connected sesignated Agent: Identification of the property of	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
connected esignated Agent: Identification of the position of t	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected esignated Agent: Identification of the position of t	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r	1 ·	FEC ID number	С
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spon
	CTORY COMMITTEE		
<u> </u>			
	PO BOX 68		
Mailing Address			
	SOUTH SALEM	NY	10590
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the second	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the second	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

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Page  $\underline{^{133}}$  of  $\underline{^{183}}$ 

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WIN THE FUTUR	RE FUND		
Mailing Address	PO BOX 2485		
	SPRINGFIELD	VA VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identii  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	SOUTH JERSEY	FIRST		
	Marilian Adalaha	C/O RED CURVE SOLUTIONS		1
	Mailing Address	138 CONANT STREET 2ND FLOOR		
			NAA	01015
		BEVERLY	MA	01915
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Full Name L			
	Mailing Address	CITY A	STATE A	ZIP CODE A
		•		ZIP CODE A
9.	Mailing Address  TITLE OR POSITION	Tes: List all banks or other depositories in which	STATE A	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor	ries: List all banks or other depositories in which intains funds.	STATE A	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank,	ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fu	indraising Representativ	ve, or Leadership PAC Spon
BANKS VICTOR	Y FUND		
	<sub>I</sub> PO BOX 30844		
Mailing Address	1 0 BOX 00077		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	loint Fundraising Represen	tative Leadership PAC Sp
Connecte			tative Leadership PAC Sp
Connecte	d Organization Affiliated Committee		tative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee		tative Leadership PAC Sp
Connecte esignated Agent: Identif	Affiliated Committee x		tative Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee x		
Connecte esignated Agent: Identif	Affiliated Committee x		
connected esignated Agent: Identification of the position of t	Affiliated Committee  Ty by name, address (phone number – optional  CITY   CITY   CITY   Ories: List all banks or other depositories in whom the committee of t	STATE A Telephone Number	ZIP CODE A
Esignated Agent: Identification of Bank, Connected Esignated Agent: Identification of Connected Esignated	Affiliated Committee  Ty by name, address (phone number – optional  CITY   CITY   CITY   Ories: List all banks or other depositories in whom the committee of t	STATE A Telephone Number	ZIP CODE A
connected esignated Agent: Identification of the position of t	Affiliated Committee  Ty by name, address (phone number – optional  CITY   CITY   CITY   Ories: List all banks or other depositories in whom the committee of t	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisir	ig Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representativ	e, or Leadership PAC Spon
JACOBS VICTOR	RY COMMITTEE		
1			
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , , VA ,	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of the properties of the propertie	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposited afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
.,			
Mailing Address	PO BOX 1488		
-			
	CRANBERRY TOWNSHIP	PA	16066
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	STATE	Leadership PAC S
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name	cy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identification of the Full Name    TITLE OR POSITION    anks or Other Depositor	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
FORT VICTORY	FUND 		
Mailing Address	332 W LEE HWY		
Mailing Address	#303		
	WARRENTON	, VA	20186
Relationship:	CITY A	STATE ▲	ZIP CODE A
riciationship.	OH F	SIAIE	ZIF CODE A
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify	y by name, address (phone number – optional)		
esignated Agent: Identify	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify  Full Name    Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name    Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identify  Full Name	y by name, address (phone number – optional)  CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	y by name, address (phone number – optional)  CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc and and and and and and and and and	y by name, address (phone number – optional)  CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or material depository, etc and and and and and and and and and	y by name, address (phone number – optional)  CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(g

Page 139 of 183

h). <b>Joint Fundraisin</b>	g raiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected SMITH VICTORY	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
<u> </u>			
	824 S. MILLEDGE AVENUE		
Mailing Address	SUITE 101		
	ATHENS	GA GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee Joint by name, address (phone number – optional)		
Connected esignated Agent: Identify Full Name	Affiliated Committee   Joint  by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify  Full Name  Mailing Address	Affiliated Committee  y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY  CITY  Te	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi		FEC ID number	С
1		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
WALBERG VICT	ORY FUND		
Mailing Address	PO BOX 1362		
ivialling Address			
	JACKSON		49204
Deletion dele			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) (	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S. MILLEDGE AVENUE SUITE 101		
		ATHENS	, GA	30605
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
			Fundraising Representa	
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel-	ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.	he committee deposit	s funds, holds accounts, rents
	Name of Bank,			
	Name of Bank, Depository, etc.			
	Depository, etc.			
	Depository, etc.			

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1	I	FEC ID number	С
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
KATKO VICTOR	Y FUND		
Mailing Address	228 S. WASHINGTON STREET		
Ü	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	STATE	Leadership PAC S
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

յ) or (h). <b>J</b>	oint Fundraising	Participant:			
1			FEC I	D number	С
2. 🔟			FEC I	D number	C
3. 🖳			FEC I	D number	C
4.			FEC I	D number	C
		rganization, Affiliated Committee, Jo	int Fundraising Re	presentative	e, or Leadership PAC Sponsor
ZELD	IN VICTORY	COMMITTEE 2020			
		47 FLINTLOCK DRIVE			
Mailii	ng Address	T I I I I I I I I I I I I I I I I I I I			
		SHIRLEY		NY	11967
Relat	tionship:	CITY A		STATE ▲	ZIP CODE ▲
Designated	d Agent: Identify	oy name, address (phone number – op	otional)		
Full Na	ame	oy name, address (phone number – op	otional)		
Full Na		oy name, address (phone number – op	otional)		
Full Na	ame	oy name, address (phone number – op	otional)		
Full Na	ame		otional)		
Full Na Mailing	ame	CITY	otional)	STATE A	ZIP CODE A
Full Na Mailing	ame	CITY	otional)  Telephone N		ZIP CODE A
Full Na Mailing	Address OR POSITION	CITY A	Telephone N	lumber	
Full Na Mailing	Address  OR POSITION  Other Depositorionsit boxes or main	CITY A	Telephone N	lumber	
Full Na Mailing	Address  OR POSITION  Other Depositorionsit boxes or main	CITY A	Telephone N	lumber	
Full Na Mailing  TITLE  Banks or safety depo	Address  OR POSITION  Other Depositorionsit boxes or main	CITY A	Telephone N	lumber	
Full Na Mailing  TITLE  Banks or esafety depo	Address  OR POSITION  Other Depositoric posit boxes or main stank, etc.	CITY A	Telephone N	lumber	
Full Na Mailing  TITLE  Banks or esafety depo	Address  OR POSITION  Other Depositoric posit boxes or main stank, etc.	CITY A	Telephone N	lumber	

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> n		FEC ID number	
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		T LO ID Humber	0
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
HUIZENGA VICT			
Mailing Address	P.O. Box 2485		
	Springfield	, , ,   VA	22152
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or material depositors, etc.	y by name, address (phone number – optional)  CITY   Te  ries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi		FEC ID number	С
1		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	aising Renresentativ	e or Leadership PAC Spon
	RESSIONAL TRUST	aising riepresentative	c, or readership i Ao open
Mailing Address	P.O. Box 701		
-			
	Clayton	l NC	27528
Relationship:	CITY ▲	STATE A	ZIP CODE A
r totationionip.	OIT Z		
	ed Organization Affiliated Committee Joint Ify by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC S
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	ify by name, address (phone number – optional)	Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name     Mailing Address   TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of the serious part of the serious	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
RODNEY DAVIS	VICTORY FUND		
	<sub> </sub> P.O. Box 9891		
Mailing Address			
	Arlington	VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisin</b>	g Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
SAM GRAVES VI	CTORY FUND		
Mailing Address	2345 GRAND BLVD SUITE 2400		
	KANSAS CITY	MO	64108
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	Organization Affiliated Committee Join by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Identify  Full Name		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identify  Full Name		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identify  Full Name	by name, address (phone number – optional)	st Fundraising Representation	
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
Full Name	by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) c	or(h). <b>Joint Fundraisin</b> g	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	TURNER VICTOR	Y FUND		
	Mailing Address	824 S. MILLEDGE AVENUE		
		SUITE 101		
		ATHENS	GA	30605
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name			
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
	Full Name Mailing Address	CITY   CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositori safety deposit boxes or mail	CITY   CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
8.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositorisafety deposit boxes or mail  Name of Bank, Depository, etc.	CITY   CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositorisafety deposit boxes or mail  Name of Bank, Depository, etc.	CITY   CITY   Tele  ies: List all banks or other depositories in which the	STATE ▲	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1	1		FEC ID number	C
2	2		FEC ID number	C
3	3.		FEC ID number	C
4	4		FEC ID number	C
		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
L	DRAD WENSTRUI	P VICTORY FUND		
	Mailing Address	PO BOX 30844		
	Mailing Address			
		BETHESDA	, MD ,	. 20824
	Delete esta			
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Joint F	undraising Representa	ative Leadership PAC Sponsor
8. <b>Desi</b>	ignated Agent: Identify	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
F	Full Name	by name, address (phone number – optional)		
F		by name, address (phone number – optional)		
F	Full Name	by name, address (phone number – optional)		
F	Full Name	by name, address (phone number – optional)		
ľ	Full Name	CITY A	STATE A	ZIP CODE A
1	Full Name	CITY A	STATE A	
1	Full Name	CITY A		
9. <b>Ban</b> l	Full Name	CITY   CITY   Tele  es: List all banks or other depositories in which th	phone Number	ZIP CODE 🛦
9. <b>Ban</b> l safet	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositori ty deposit boxes or main	CITY   CITY   Tele  es: List all banks or other depositories in which the	phone Number	ZIP CODE 🛦
9. Banl safet	Full NameMailing Address  TITLE OR POSITION TO THE PROPERTY OF THE PROP	CITY   CITY   Tele  es: List all banks or other depositories in which the	phone Number	ZIP CODE 🛦
9. <b>Banl</b> safet	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositori ty deposit boxes or main	CITY   CITY   Tele  es: List all banks or other depositories in which the	phone Number	ZIP CODE 🛦
9. <b>Banl</b> safet	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.	CITY   CITY   Tele  es: List all banks or other depositories in which the	phone Number	ZIP CODE 🛦
9. <b>Banl</b> safet	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositori ty deposit boxes or main ne of Bank, ository, etc.	CITY   CITY   Tele  es: List all banks or other depositories in which the	phone Number	ZIP CODE 🛦

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h). <b>Joint Fundraisi</b> r	ig Faiticipant.		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
TEAM LAHOOD			
Mailing Adalys	824 S. MILLEDGE AVENUE		
Mailing Address	SUITE 101		
			00005
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Teleprises: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(

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TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, repository, etc.  Mailing Address	l ▼	CITY A s or other depositories in	Telephone N		ZIP CODE   ZIP CODE   st funds, holds accounts, rent
TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, epository, etc.	l ▼	CITY A	Telephone N	lumber	ZIP CODE ▲
TITLE OR POSITION  anks or Other Deposite defety deposit boxes or mane of Bank,	l ▼	CITY A	Telephone N	lumber	ZIP CODE ▲
TITLE OR POSITION	l ▼	CITY A	Telephone N	lumber	ZIP CODE ▲
				STATE A	
Mailing Address					1 , , , , 1-1 , ,
Mailing Address					<u>, , , , , , , , , , , , , , , , , , , </u>
Mailing Address					
Full Name					
		ss (phone number – option		y noprosent	Loadolship i no s
	d Organization	1 -	Joint Fundraisin		
Relationship:		CITY A		STATE A	ZIP CODE ▲
	WARRENTON			ı VA ı	20186
Mailing Address	#303				
	332 W LEE HV	/Y			
<u>.</u>					
ANDY BARR VIC			Fundraising Re	oresentativ	e, or Leadership PAC Spon
4.			└─ │	O number	C
5.			└─┘ ┌	O number	C
3.			,   FECT	0 number	C
1					

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). <b>Joint Fundraising</b>			_		
1.				FEC ID number	С
2.				FEC ID number	С
3.				FEC ID number	С
4.				FEC ID number	C
=	=	ted Committee, Joi	int Fundrais	ing Representativ	e, or Leadership PAC Spor
WILSON LEADER	SHIP FUND				
Mailing Address	PO BOX 2456				
	SPRINGFIELD			VA	22152
Relationship:		CITY A		STATE A	ZIP CODE ▲
		ffiliated Committee		ndraising Represent	ative Leadership PAC S
Connected  esignated Agent: Identify  Full Name				ndraising Represent	ative Leadership PAC S
esignated Agent: Identify				ndraising Represent	ative Leadership PAC S
esignated Agent: Identify  Full Name				ndraising Represent	ative Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (p		otional)		ative Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (p	phone number – op	otional)		
esignated Agent: Identify  Full Name	by name, address (p	phone number — op	otional)		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	by name, address (p	ohone number – op	otional)	STATE A	
Full Name Mailing Address  TITLE OR POSITION Tanks or Other Depositori	by name, address (p	ohone number – op	otional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	by name, address (p	ohone number – op	otional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori aftety deposit boxes or main ame of Bank, epository, etc.	by name, address (p	ohone number – op	otional)	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng ranoipan.	FFC ID number	C
1.		FEC ID number	-1 - 1 - 1 - 1
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM GALLAGE	<del>1</del> ER 		
Mailing Address	1915 SOUTH WEBSTER AVE		
	STE D		
	GREEN BAY	wi j	54301
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)  Line (phone number – optional)  City ▲		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and	ify by name, address (phone number – optional)  CITY   CITY   Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Cories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Cories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	1				
Mailing Address					
ame of Bank, epository, etc.					
anks or Other Deposito afety deposit boxes or ma		anks or other depositories	in which the comi	mittee deposit	s funds, holds accounts, ren
			Telephone	Number	
TITLE OR POSITION	▼	CITY A		STATE A	ZIP CODE ▲
Mailing Address					
Full Name					
	d Organization  y by name, add	Affiliated Committee	Joint Fundrais	ing Represent	Leadership PAC S
Relationship:		CITY ▲	<b>.</b>	STATE A	ZIP CODE ▲
Polationship	ATHENS	OITY :		GA CTATE A	30605
	ATUENO			0.	20005
Mailing Address	824 S MILL	EDGE AVE, STE 101			
ame of Any Connected		Affiliated Committee, Jo	int Fundraising R	epresentativ	e, or Leadership PAC Spon
4.			. 20		<u> </u>
3				ID number	C
2.				ID number	C
1			I EEC	ID number	C

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h), 6, 8 a

h). <b>Joint Fundraisi</b> i	1	EEC ID number	С
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
WALORSKI VICT	TORY FUND		
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	, ,   VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	Affiliated Committee Joint by by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	fy by name, address (phone number – optional)		Leadership PAC S
esignated Agent: Identif	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identii  Full Name    Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(g) oı	r(h). <b>Joint Fundraisin</b> ç	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	using Representative	e, or Leadership PAC Sponsor
	L L L L L L L L			
	Mailing Address	1919 OXMOOR ROAD		
		#223		
		HOMEWOOD	AL	35209
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
-				
. 1		by name, address (phone number – optional)		
. 1	Designated Agent: Identify	by name, address (phone number – optional)		
. 1	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
. 1	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
. 1	Designated Agent: Identify  Full Name	CITY A	STATE A	ZIP CODE A
. 1	Designated Agent: Identify  Full Name  Mailing Address	CITY A		
- !	Pull Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank,	CITY A  Tel  Ties: List all banks or other depositories in which ti	STATE ▲ ephone Number	ZIP CODE A
- !	Pull Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail name of Bank, Depository, etc.	CITY A  Tel  Ties: List all banks or other depositories in which ti	STATE ▲ ephone Number	ZIP CODE A
- !	Pull Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank,	CITY A  Tel  Ties: List all banks or other depositories in which ti	STATE ▲ ephone Number	ZIP CODE A
- !	Pull Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail name of Bank, Depository, etc.	CITY A  Tel  Ties: List all banks or other depositories in which ti	STATE ▲ ephone Number	ZIP CODE A
- !	Pull Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail name of Bank, Depository, etc.	CITY A  Tel  Ties: List all banks or other depositories in which ti	STATE ▲ ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines

TITLE OR POSITION			Telephone Nur		s funds, holds accounts, ren
TITLE OR POSITION			Tolophono Nur	mbor	[-] [-]
	▼		31		Zii OODL A
		CITY A		[ATE ▲	ZIP CODE ▲
Mailing Address					
Full Name	1				
		s (phone number – optiona		пергезепт	Leadership FAC S
	d Organization		Joint Fundraising I		
Relationship:	ATTLING	CITY A		STATE A	ZIP CODE A
	ATHENS			ı GA ı	30605
Mailing Address	824 S. MILLEDO	3E AVENUE			
ame of Any Connected			ındraising Repre	esentative	e, or Leadership PAC Spon
4.			FEC ID	number	[C]
3.			FEC ID		C
2.			FEC ID		C
			_	number	C

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). <b>Joint Fundraisi</b>	.9		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee  Joint y by name, address (phone number – optional)		
esignated Agent: Identif	Affiliated Committee    y Joint  y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  y Joint  y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page  $\underline{^{159}}$  of  $\underline{^{183}}$ 

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
FRIENDS OF AN	DY BARR COMMITTEE		
AA-Traa Aalaa	332 W. LEE HIGHWAY		
Mailing Address	#303		
			00400
	WARRENTON	VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Join	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	
esignated Agent: Identif	by by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name	y by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name	y by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name	y by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	
		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		TEO ID Hambor	0
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
MAST VICTORY	COMMITTEE		
	824 S MILLEDGE AVE STE 101		
Mailing Address			
	.=		
	ATHENS	GA GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	by name, address (phone number - optional)		
Full Name			
Full Name L			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A	STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITION	CITY A	elephone Number	
Mailing Address  TITLE OR POSITION	CITY A  ries: List all banks or other depositories in which	elephone Number	
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or main arms of Bank,	CITY A  ries: List all banks or other depositories in which	elephone Number	
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or main arms of Bank,	CITY A  ries: List all banks or other depositories in which	elephone Number	
Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mailame of Bank, epository, etc.	CITY A  ries: List all banks or other depositories in which	elephone Number	

FEC Form 1S (Revised 02/2017)

Page 161 of 183

h). <b>Joint Fundraisi</b> r			1	EEC II	) number	C	
1.							=
2.					) number	С	=
3.				FEC II	) number	C	-
4				FEC II	) number	C	
		Affiliated Commit	tee, Joint Fun	draising Rep	resentativ	re, or Leadership PAC S	pon
MIKE ROGERS \	/ICTORY						
Mailing Address	2523 WILSO	ON BOULEVARD					
	#4						
	ARLINGTO	N		1	VA	22201	
Relationship:		CITY A			STATE A	ZIP CODE	<b>A</b>
Connecte	d Organization	Affiliated Comm	nittee 🗶 Jo	int Fundraisinç	, Represent	tative Leadership PA	C S
				int Fundraisinç	g Represent	tative Leadership PA	C S
Connecte esignated Agent: Identif				int Fundraising	g Represent	tative Leadership PA	C Sp
esignated Agent: Identif				int Fundraising	Represent	tative Leadership PA	C Sp
esignated Agent: Identif				int Fundraising	g Represent	Leadership PA	C S
esignated Agent: Identif	y by name, add		er – optional)		Represent		
esignated Agent: Identif	y by name, add	Iress (phone numb	er – optional)		Represent		
esignated Agent: Identif  Full Name  Mailing Address	y by name, add	lress (phone numb	er – optional)		STATE A		
esignated Agent: Identif  Full Name	y by name, add	Iress (phone numb	er – optional)	Telephone N	STATE A	ZIP CODE A	
esignated Agent: Identif  Full Name	y by name, add	Iress (phone numb	er – optional)	Telephone N	STATE A		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, add	Iress (phone numb	er – optional)	Telephone N	STATE A	ZIP CODE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the second	y by name, add	Iress (phone numb	er – optional)	Telephone N	STATE A	ZIP CODE A	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make the second process of the second process or make the second process of the second process or make the second process of the second process or make the second pr	y by name, add	Iress (phone numb	er – optional)	Telephone N	STATE A	ZIP CODE A	

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundrais</b> i	ing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
ALLEN VICTOR	<b>Y FUND</b> 		
		1 1 1 1 1 1 1	
	PO BOX 420521		
Mailing Address	FU BOX 420521		
	ATLANTA 	GA L	30342
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	ed Organization Affiliated Committee Join	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Ident Full Name Mailing Address	ify by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)  CITY   CITY		
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of the content o	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   To  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisir	ig Participant:			
1.		FEC ID nur	mber C	
2.		FEC ID nur	mber C	
3.		FEC ID nur	mber C	
4.		FEC ID nur	mber C	
	Organization, Affiliated Committee, Joint F	Fundraising Represe	ntative, or Leadership PAC	Spon
BUDD VICTORY				
	<sub>I</sub> PO BOX 97275			
Mailing Address				
	RALEIGH		NC 27624	
Relationship:	CITY ▲	STA	ATE ▲ ZIP CODE	<b>A</b>
		Joint Fundraising Rep	resentative Leadership PA	AC Sp
	d Organization Affiliated Committee		resentative Leadership Pr	AC Sp
esignated Agent: Identif			resentative Leadership Pr	AC Sp
esignated Agent: Identif			Leadership Pr	AC Sp
esignated Agent: Identif			Leadership Pr	AC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – options			
esignated Agent: Identif	y by name, address (phone number – options	al)	E A ZIP CODE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the control of th	y by name, address (phone number – options  CITY   CITY   pries: List all banks or other depositories in w	al) STAT Telephone Numbe	ZIP CODE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the control of th	y by name, address (phone number – options  CITY   CITY   pries: List all banks or other depositories in w	al) STAT Telephone Numbe	ZIP CODE A	
esignated Agent: Identification Full Name	y by name, address (phone number – options  CITY   CITY   pries: List all banks or other depositories in w	al) STAT Telephone Numbe	ZIP CODE A	
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – options  CITY   CITY   pries: List all banks or other depositories in w	al) STAT Telephone Numbe	ZIP CODE A	

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
FERGUSON VIC	;TORY FUND		
	<sub>1</sub> P.O. BOX 420304		
Mailing Address	F.O. BOX 420304		
	ATLANTA 	GA L	30342
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee Join	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
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esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	st Fundraising Representation	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and ma	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

2. 3. 4. 4. Name of Any Connected Davidson Victory	Organization, Affili		FEC ID number	C C
4. Name of Any Connected	Organization, Affili			
	Organization, Affili			
	Fund	ated Committee, Joint Fun	draising Representativ	ve, or Leadership PAC Sponsor
Mailing Address	499 S. Capitol St	reet SW		
	Suite 407 Washington		DC	20003
Relationship:		CITY A	STATE A	ZIP CODE ▲
Connected	d Organization	Affiliated Committee	int Fundraising Represent	tative Leadership PAC Spon
Designated Agent: Identify	y by name, address	(phone number – optional)		
Full Name				
Mailing Address				
		CITY A	STATE ▲	
TITLE OR POSITION	▼	1	Telephone Number	

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Iame of Any Connected Organization CRAMER VICTORY FUNITY Mailing Address  PO BOX ALEXAN Relationship: Connected Organization resignated Agent: Identify by name, Mailing Address  TITLE OR POSITION  TITLE OR POSITION	26141  DRIA  CITY   Affiliated Committee	FEC ID number FEC ID number FEC ID number FEC ID number  Graising Representative  VA  STATE   nt Fundraising Represent	22313
3.	n, Affiliated Committee, Joint Fund  26141  DRIA  CITY   Affiliated Committee	FEC ID number FEC ID number  draising Representative  VA  STATE	e, or Leadership PAC Spons
ALEXAN Relationship:  Connected Organization  ALEXAN Relationship:  Connected Organization  Connected Organization  Mailing Address  TITLE OR POSITION  TITLE OR POSITION  Tanks or Other Depositories: List all afety deposit boxes or maintains fund	n, Affiliated Committee, Joint Fund  26141  DRIA  CITY   Affiliated Committee	FEC ID number	e, or Leadership PAC Spons  22313  ZIP CODE
ame of Any Connected Organization CRAMER VICTORY FUNITY  Mailing Address  PO BOX  ALEXAN  Relationship:  Connected Organization  esignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains fund	n, Affiliated Committee, Joint Fund  26141  DRIA  CITY   Affiliated Committee	draising Representative	e, or Leadership PAC Spons  22313  ZIP CODE
ame of Any Connected Organization CRAMER VICTORY FUNITY  Mailing Address  PO BOX  ALEXAN  Relationship:  Connected Organization  esignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains fund	26141  DRIA  CITY   Affiliated Committee	VA STATE A	22313
CRAMER VICTORY FUNI  Mailing Address  PO BOX  ALEXAN  Relationship:  Connected Organization  esignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains fund	26141  DRIA  CITY   Affiliated Committee	VA STATE A	22313
Mailing Address  ALEXAN  Relationship:  Connected Organization  resignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION ▼  Fanks or Other Depositories: List all afety deposit boxes or maintains fund	26141  DRIA  CITY   Affiliated Committee	STATE ▲	ZIP CODE ▲
Relationship:  Connected Organization  esignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains fund	DRIA  CITY   Affiliated Committee	STATE ▲	ZIP CODE ▲
ALEXAN Relationship:  Connected Organization  esignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains fund	DRIA  CITY   Affiliated Committee	STATE ▲	ZIP CODE ▲
Relationship:  Connected Organization  esignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains fund	DRIA  CITY   Affiliated Committee	STATE ▲	ZIP CODE ▲
Relationship:  Connected Organization  resignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositories: List all afety deposit boxes or maintains fund	CITY A  Affiliated Committee	STATE ▲	ZIP CODE ▲
Relationship:  Connected Organization  resignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositories: List all afety deposit boxes or maintains fund	CITY A  Affiliated Committee	STATE ▲	ZIP CODE ▲
esignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains fund	n Affiliated Committee		
esignated Agent: Identify by name,  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Depositories: List all afety deposit boxes or maintains fund	n Affiliated Committee		
Mailing Address  TITLE OR POSITION ▼  anks or Other Depositories: List all afety deposit boxes or maintains fund			
TITLE OR POSITION ▼  anks or Other Depositories: List alafety deposit boxes or maintains fund			
TITLE OR POSITION ▼  anks or Other Depositories: List al afety deposit boxes or maintains fund			
TITLE OR POSITION ▼  anks or Other Depositories: List al afety deposit boxes or maintains fund			
tanks or Other Depositories: List all afety deposit boxes or maintains fund			
afety deposit boxes or maintains fund	CITY A	STATE ▲	ZIP CODE ▲
afety deposit boxes or maintains fund		Telephone Number	
epository, etc.	banks or other depositories in which s.	n the committee deposit	ts funds, holds accounts, rent
Mailing Address			
1			

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(h). <b>Joint Fundraisi</b>	ig Faiticipant.		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WESTERN MICH	IIGAN VICTORY FUND		
	200 C. Washington Chart		
Mailing Address	228 S. Washington Street		
	Suite 115		
	Alexandria	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	
esignated Agent: Identif	by by name, address (phone number – optional)		
esignated Agent: Identif	by by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION   anks or Other Depositor	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundrais			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spons
JAKE ELLZEY V	ICTORY FUND		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident  Full Name  Mailing Address	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident	fy by name, address (phone number – optional)  CITY		
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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5(a)	or(h). <b>Joint Fundraising</b>	p Participant:		
· (9)	1.	,	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4			<u> </u>
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	824 S MILLEDGE AVE STE 101		
		ATHENS	GA GA	30605
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Full Name	by name, address (phone number – optional)		
	Mailing Address	1		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	lephone Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ries: List all banks or other depositories in which t intains funds.	the committee deposit	s funds, holds accounts, rents
	Mailing Address			
	wailing Address			
		CITY A	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
O/TICKET GIOTOI			
Mailing Address	PO BOX 64845		
Walling / Idahooo			
	BATON ROUGE	l LA	70896
<b>-</b>			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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n). <b>Joint Fundraising</b>			1	FF0 :-		( `	
1.				FEC ID nu		C	
2.				FEC ID nu	ımber	С	
3				FEC ID nu	ımber	C	
4.				FEC ID nu	ımber	С	
ame of Any Connected (	Organization, Affilia	ited Committee	, Joint Fundra	aising Repres	entative	, or Leadership PA	AC Spor
RUTHERFORD VI	CTORY FUND	) 					
Mailing Address	3030 HARTLEY R	D 					
	STE 120						
	JACKSONVILLE				FL	32257	-
Relationship:		CITY ▲		S1	TATE A	ZIP CO	DDE 🛦
	Organization A	Affiliated Committe	ee X Joint	Fundraising Re	epresenta	tive Leadershi	
		Affiliated Committe		Fundraising Re	epresenta	ive Leadershi	
Connected esignated Agent: Identify		Affiliated Committe		Fundraising Re	epresenta	ive Leadershi	
Connected  esignated Agent: Identify  Full Name		Affiliated Committe		Fundraising Re	epresenta	Leadershi	
Connected  esignated Agent: Identify  Full Name	by name, address (	Affiliated Committe	- optional)		epresentat	Leadershi	PAC S
Connected  esignated Agent: Identify  Full Name	by name, address (	Affiliated Committee	- optional)		epresentar		PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address (	Affiliated Committee	- optional)		TE A		PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address (	Affiliated Committee  (phone number -	- optional)	STA lephone Numb	TE A	ZIP COE	PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorifety deposit boxes or mail	by name, address (	Affiliated Committee  (phone number -	- optional)	STA lephone Numb	TE A	ZIP COE	PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (	Affiliated Committee  (phone number -	- optional)	STA lephone Numb	TE A	ZIP COE	PAC S

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>		FEC ID number	C
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		T LO 15 Hambor	0
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
FEENSTRA VIC	TORY FUND		
	PO BOX 183		
Mailing Address			
	LIUDOON.	)	54040
	HUDSON	WI	54016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee    Joint  ify by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC S
		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representation	Leadership PAC S
esignated Agent: Identi		t Fundraising Representation	Leadership PAC S
esignated Agent: Identi	ify by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name     Mailing Address	ify by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundi	raising Representativ	e, or Leadership PAC Spons
CALVERT VICTO	DRY FUND		
	PO POV 00044		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
JOHNSON LEAD	DERSHIP FUND		
Mailing Address	2900 CLEARVIEW PKWY		
Mailing Address	SUITE 206		
	METAIRIE	ı LA ı	70006
Relationship:			
neiationship.	CITY ▲	STATE A	ZIP CODE ▲
	Affiliated Committee Join  fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	state A	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of the control of the	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
•	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
STEIL VICTORY	FUND		
	1 1818 MILTON AVE		
Mailing Address			
	#1448		
	JANESVILLE	WI	53545
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representa	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of the control of the	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
TAKE BACK THE	E HOUSE 2022		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824-0844
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		int Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi		int Fundraising Represent	tative Leadership PAC Spo
Designated Agent: Identi	ed Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi	ed Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi	ed Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Spo
Designated Agent: Identi	Affiliated Committee   Jo  fy by name, address (phone number – optional)		
Designated Agent: Identi	Affiliated Committee   Jo  fy by name, address (phone number – optional)	int Fundraising Represent	
Designated Agent: Identi  Full Name    Mailing Address	Affiliated Committee   Jo  fy by name, address (phone number – optional)  CITY   CITY		
Designated Agent: Identi  Full Name    Mailing Address	Affiliated Committee   Jo  fy by name, address (phone number – optional)  CITY   CITY	STATE A	
Pesignated Agent: Identi  Full Name	Affiliated Committee  Affiliated Committee  Type  Type	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite tafety deposit boxes or mailing and maili	Affiliated Committee  Affiliated Committee  Type  Type	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name	Affiliated Committee  Affiliated Committee  Type  Type	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name	Affiliated Committee  Affiliated Committee  Type  Type	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	Affiliated Committee  Affiliated Committee  Type  Type	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	Affiliated Committee  Affiliated Committee  Type  Type	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 177 **of** 183

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
TAKE BACK THE	E HOUSE TEXAS 2022		
	PO BOX 30844		
Mailing Address	1 0 BOX 30044		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee X Jo	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Joffy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page <u>178</u> **of** <u>183</u>

5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	•	Organization, Affiliated Committee, Joint Fundra NGRESS VICTORY FUND	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	10 N. CADDO ST.		
		PMB #174  CLEBURNE	, , TX ,	76031
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
			Fundraising Representa	
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•		ZIP CODE <b>A</b>
	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	
	Banks or Other Depositor	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	
	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	
	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	
	Banks or Other Depositor safety deposit boxes or man Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 179 of 183

TITLE OR POSITION  anks or Other Depositor afety deposit boxes or management of Bank, epository, etc.  Mailing Address	l ▼	CITY A	STATE Telephone Number		ZIP CODE   ZIP CODE   nolds accounts, rent
anks or Other Depositoratety deposit boxes or management of Bank, repository, etc.	l ▼	CITY A	STATE Telephone Number		ZIP CODE 🛦
anks or Other Depositorafety deposit boxes or management of Bank,	l ▼	CITY A	STATE Telephone Number		ZIP CODE 🛦
anks or Other Deposito	l ▼	CITY A	STATE Telephone Number		ZIP CODE 🛦
TITLE OR POSITION			STATE	<u> </u>	
TITLE OR POSITION			STATE	<u> </u>	
TITLE OR POSITION					
					-
			1	1 1.	1 1
	1	<u> </u>			
Mailing Address					
Full Name					
esignated Agent: Identif	y by name, addre	ss (phone number – optional	)		
Connecte	d Organization	Affiliated Committee	oint Fundraising Repre	esentative	Leadership PAC Sp
Relationship:		CITY 🛦	STAT	E 🛦	ZIP CODE ▲
	TAMPA	1 1 1 1 1 1 1 1 1	F	_   336	06
		<u> </u>			
Mailing Address	610 S. BOULE	:VARD			
Chris Stewart Fre	euom Fund				
		filiated Committee, Joint Fu	ndraising Represen	tative, or Lea	dership PAC Spons
7.			J		
4.			J   FEC ID num	-	
o			FEC ID num		
3.			-   FEC ID num	ber C	
1			FEC ID num	ber C	

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number  Title OR Positiories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safely deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address	g) or (h).	Joint Fundraising	g Participant:							
Sale   State	1.				FEC	ID number	С			
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Protect the House    Mailing Address	2.				FEC	ID number	С			
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Protect the House  Mailing Address  P.O. Box 30844  Bethesda  Bethesda  City ▲ State ▲ Zip CoDe ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative Leadership PAC Sponsor  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  Title OR POSITION ▼ City ▲ State ▲ Zip CoDe ▲  Telephone Number	3.				FEC	ID number	С			
Protect the House  Mailing Address  P.O. Box 30844  Bethesda  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Sponse  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Mailing Address or maintains funds.  Name of Bank, Depository, etc.  Mailing Address	4.				FEC	ID number	C			
Bethesda  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spons  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Telephone Number  Mailing Address  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address				ated Committee, Joint	Fundraising F	Representativ	e, or Lead	ership F	PAC Sp	onsor
Bethesda  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spons  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Telephone Number  Mailing Address  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address	<u> </u>									
Bethesda  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Spons  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Telephone Number  Mailing Address  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address										
Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponse  Leadership PAC Sponse  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Mailing Address:  Name of Bank, Depository, etc.  Mailing Address	٨	Mailing Address	P.O. Box 30844							
Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponse  Leadership PAC Sponse  Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Mailing Address:  Name of Bank, Depository, etc.  Mailing Address										
Designated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number — Telephone Number — Telephone Number — Mailing Address  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc			Bethesda		<u>                                   </u>	MD	2082	4	-	
Designated Agent: Identify by name, address (phone number – optional)  Full Name   Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number — — — — — — — — — — — — — — — — — — —	F	Relationship:		CITY A		STATE A		ZIP C	CODE A	
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Mailing Address  Mailing Address										
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address			by name, address	(phone number – option	nal)		<u> </u>	   _ <u> </u> _		_ <u> </u>
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address	Ful	II Name	by name, address	(phone number – option	nal)					
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address	Ful	II Name	by name, address	(phone number – option	nal)					
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address	Ful	II Name	by name, address	(phone number – option	nal)				  -  -	
safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address  Line and the same of Bank and the same of Ba	Ful Ma	Il Name			nal)	STATE A		ZIP CC	DDE A	
	Ful Ma	Il Name						ZIP CC	-   _   DDE	
CITY ▲ STATE ▲ ZIP CODE ▲	Ful Ma  Ti  Banks safety of Name of Deposition	Il Name  Address  ITLE OR POSITION  or Other Depositor deposit boxes or main of Bank, story, etc.	▼ ies: List all banks	CITY A	Telephone	Number	s funds, h			ents

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). <b>Joint Fundraising</b>	Participant:	
	1.		FEC ID number C
	2.		FEC ID number C
	3.		FEC ID number C
	4		FEC ID number
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	ising Representative, or Leadership PAC Sponsor
	Mailing Address	228 S. WASHINGTON STREET	
		SUITE 115	
		ALEXANDRIA	VA 22314
	Relationship:	CITY A	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fig.	Fundraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)	
	Mailing Address		
	TITLE OR POSITION V	CITY A	STATE ▲ ZIP CODE ▲
		Tele	ephone Number
	safety deposit boxes or main		ne committee deposits funds, holds accounts, rents
	Name of Bank, Depository, etc.		
	Mailing Address		
ı		CITY ▲	STATE ▲ ZIP CODE ▲

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM MCCAUL	TEXAS VICTORY		
Mailing Address	1005 CONGRESS AVE STE 400		
Mailing Address			
	AUSTIN	, TX	78701
Relationship:			
	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	Ad Organization Affiliated Committee X Joint	t Fundraising Represent	ative Leadership PAC Si
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee	t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi		t Fundraising Representation	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spanish
esignated Agent: Identing Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identing Full Name     Mailing Address	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraising	1 di dolpanti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	ve, or Leadership PAC Spons
LILE BERGINALY			
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE ▲
		oint Fundraising Represen	tative Leadership PAC Spo
	Organization Affiliated Committee X J by name, address (phone number – optional)		tative Leadership PAC Spo
Designated Agent: Identify			tative Leadership PAC Spo
Designated Agent: Identify  Full Name			Leadership PAC Spo
Designated Agent: Identify  Full Name			Leadership PAC Spr
Designated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)		Leadership PAC Spr
Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
Pesignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	by name, address (phone number – optional)  CITY   es: List all banks or other depositories in wh	STATE ▲ Telephone Number	ZIP CODE A
Pesignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION To a position of a fety deposit boxes or mail to a fety deposit boxes or mail	by name, address (phone number – optional)  CITY   es: List all banks or other depositories in wh	STATE ▲ Telephone Number	ZIP CODE A
Pesignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositorical Safety deposit boxes or mail Name of Bank, Depository, etc.	by name, address (phone number – optional)  CITY   es: List all banks or other depositories in wh	STATE ▲ Telephone Number	ZIP CODE A
Pesignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositorical Safety deposit boxes or mail Name of Bank, Depository, etc.	by name, address (phone number – optional)  CITY   es: List all banks or other depositories in wh	STATE ▲ Telephone Number	ZIP CODE A